

December 7, 2009

Dear Local Unit/Council or District Leader,

The Virginia PTA is pleased to announce the availability of six \$300.00 Family Fitness Grants for the 2009-2010 school year to any Virginia PTA local unit, council or district in good standing. This allocation of funds to the Health and Safety Committee was approved by the Virginia PTA Board of Managers during the Pre-Convention Board Meeting November 12, 2009.

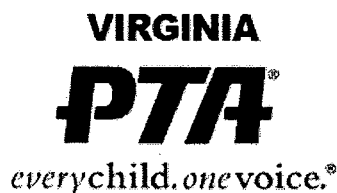
All applications must be postmarked by January 29, 2010 using the attached application form and suggested criteria. Any family fitness program conducted during the 2009-2010 school year will be eligible for consideration.

The six winners will be notified within 30 days of the deadline, announced in *The Voice* and Virginia PTA website, and recognized with a certificate during the Leadership Training Conference in July 2010.

For questions concerning the Family Fitness Grant application, please contact Virginia PTA Health and Safety Chairman, Michelle Prescott, at healthandsafety@vapta.org.

Thank you for all you do to facilitate the health and well-being of Virginia's children and families.

Best Regards,
Michelle Prescott
Virginia PTA Health and Safety Chair



Family Fitness Grant 2009-2010

Available to Local Units, Councils and Districts

Studies show that children are becoming less active and more overweight. The causes are many, but the trend can be reversed. Experience has proven that the most effective approach toward developing healthy behaviors is one with family involvement. We invite your PTA to apply for one of the \$300 family fitness grants to be implemented during the 2009-2010 school year.

Attached is the application form for this project. All applications are to be postmarked by **January 29, 2010**. Send **four (4)** copies of the prepared application to the address below. Awards will be announced in February.

The following is the checklist of requirements for an application to qualify for consideration. If an application does not fulfill the requirements, it will be **disqualified**.

Application cover sheet

- All information completed as requested
- Local PTA, Council or District is in good standing.
 - Check 2009 records to verify dues payment received in Virginia PTA state office by December 1, 2006
 - Verify bylaws are current.
- Signed with original signatures of Local Unit President, Council President, or District Director and Project Chairman verifying accuracy of application.

Narrative

- Local PTA's name at the top of each page.
- A Health and/or P.E. Teacher must be included in the plan.
- Submitted on a maximum of 5 single-sided sheets of 8 ½ X 11" plain white paper.
- Word processed or typed in black ink, the equivalent of Arial 12-point (or larger) font.
- Double-spaced with one inch margins on all sides.
- Pages are numbered and facts outlined in the following order (answers need not be lengthy but should be clear and as detailed as possible):

- Describe your student population, PTA membership and school community (Councils and Districts—describe your community, which must include the number of units in your membership and total student population). **(10 points)**
- State the goal of your project (what you hope will be your final outcome/impact on students, parents, staff and school community). State how you plan to evaluate success of your project and any follow-up activities you plan to offer in the future to assist in maintaining your goal. **(20 points)**
- Outline your PTA's proposed activities, locations of activities and timeline for this project. How will students, parents, staff and community be involved? **(25 points)**
- Which community agencies or organizations do you plan to involve or use as resources for your project? **(15 points)**
- Explain the role of your school nurse, PE teacher and/or cafeteria manager in your proposed activities. Describe how the project fits into and/or enhances your proposed activities. Describe how the project fits into and/or enhances your school's fitness policy. Include information on obesity efforts and/or physical activities already occurring in your school. **(20 points)**
- Outline your proposed budget to fund this project. Be as specific as possible. If additional funds (other than grant funds) will be needed, include the source and amounts of these funds. Grant funds may be used for educational materials, awards, incentives, printing, copying, supplies for health screenings, or measurement devices. In addition, funds may be used for honorariums for educational speakers but all must be related to the program. Grant funds cannot be used for transportation or refreshments. **Give total estimated amount of budget for project. Indicate which items will be paid by grant funds.** Use the following format to provide a description, justification and source of funding (grant or other) of your budget for this program. **(10 points)**

Name of item(s) and purpose of item(s) to be purchased: _____

Cost of item: _____ Source of funds: _____

Submission of Application

- No binders, covers, or colored paper.
- Limit of 6 pages: 1 page for application cover sheet, up to 5 pages for narrative.
- No faxes or e-mail documents.
- Mail original entry and 4 copies to:

Virginia PTA
 ATTN: 2009 Family Fitness Grant
 1027 Wilmer Avenue
 Richmond, VA 23227

- Deadline: Postmarked no later than January 29, 2010.**



Family Fitness Grant Application Cover Sheet

Name of PTA/PTSA Unit/Council or District _____

If Local Unit—Name of Principal _____

If Council—Name of Superintendent _____

Name of PTA President or District Director _____

Address _____

Home Phone # () _____ Work Phone # () _____

E-mail address _____

Name of Project Chairman _____

Address _____

Home Phone # () _____ Work Phone # () _____

E-mail address _____

Our signatures below verify that per local unit, council, or district records, we are a unit in good standing with the Virginia PTA.

____ Our first payment of dues was made to the Virginia PTA state office by December 1, 2009

____ Our local unit, council or district bylaws are current with the Virginia PTA.

____ If we receive a **Family Fitness Grant** from the Virginia PTA, we will complete and return the "Final Report Form" upon completion of our project. We understand we will receive this form with the award of the grant.

Signature of PTA/PTSA President or District Director

Date: _____

Signature of Project Chairman

Date: _____

The Application Cover Sheet must be attached as page 1 of your application for the mini-grant followed by the narrative of your project/program.