

Kemper Preview Form

This is an example of the application questions with which you will be presented. It is recommended that you compose the answers to the paragraph questions in a word processing program and then cut and paste that text into the online application.

Contact Information

* First Name (Text)(40 character maximum)

* Last Name

(Text)(40 character maximum)

* Email Address

(Text)(100 character maximum)

* Verify Email Address (Text)(500 character maximum)

* Personal Mobile Phone Number (Text)(500 character maximum)

* Personal Address (Text)(100 character maximum)

* City

(Text)(50 character maximum)

* State

(Single-Select List)

- (Not Applicable)
- Alabama
- Alaska
- American Samoa
- Arizona
- Arkansas
- Armed Forces Africa/Canada/Europe/Middle East
- Armed Forces Americas (except Canada)
- Armed Forces Pacific
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Federated States of Micronesia
- Florida
- Georgia
- Guam
- Hawaii
- Idaho
- Illinois
- IndianaIowa
- Kansas
- Kentucky
- Louisiana
- Maine
- Marshall Islands
- Maryland
- Massachusetts
- Michigan
- Minnesota
- Mississippi
- Missouri
- Montana
- NebraskaNevada
- New Hampshire
- New Jersey
- New Mexico
- New York

Instructions:

Instructions:

Instructions:

• Please enter the same email address used to register.

Instructions:

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Instructions:

 Palau Pennsylvania Puerto Rico Rhode Island South Carolina South Dakota Tennessee Texas Utah Vermont Virgin Islands Virginia Washington West Virginia Wisconsin Wyoming *Zip/Postal Code (Text)(20 character maximum) 	Instructions:
About You	
	Instructions:
* Brief Bio (Paragraph)(4000 character maximum)	• In 500 words or less, tell us about yourself and what makes you shine as a bilingual educator. Please include details about your education, professional experience, and leadership activities/memberships that demonstrate your expertise as an educator.
Attach Resume (Optional)	Instructions:
(File Upload)File Upload; 5242880 byte limit* Have you ever received a Read Conmigo grant from The Kemper Foundation in the past?(Yes/No)	Instructions:
*When did you receive a Read Conmigo grant in the past? (Checkbox List)	
 Spring 2022 Fall 2022 Spring 2023 Fall 2023 Spring 2024 Fall 2024 	Instructions:
* How did you hear about the Read Conmigo grant program? (Single-Select List)	
 Social Media School Administrator Kemper Agent Kemper Employee Professional Organization Other 	Instructions:
*Please explain how you heard about the Read Conmigo grant program. (Paragraph)(4000 character maximum)	Instructions:
*If social media, please specify which platform (Text)(500 character maximum)	Instructions:
*If professional organization, please specify which professional organization (Text)(500 character maximum)	Instructions:
About Your School	
* School Type (Single-Select List)	
PublicCharter	Instructions:
* School District (Text)(500 character maximum)	Instructions:
* School Name	Instructions:
(Text)(500 character maximum)	Please provide the formal, full name of your school.

North CarolinaNorth DakotaNorthern Mariana Islands

OhioOklahomaOregon

* School Website (Text)(500 character maximum)	Instructions:		
* School Address 1 (Text)(500 character maximum)	Instructions:		
School Address 2 (Text)(500 character maximum)	Instructions:		
* School City (Text)(500 character maximum)	Instructions:		
* School County (Single-Select List)			
Broward County			
Dallas CountyLos Angeles County			
Miami-Dade County	Instructions:		
Orange County			
Riverside County			
San Bernardino County Vanture County			
Ventura County			
* School State (Single-Select List)			
California	Instructions:		
• Florida			
• Texas			
* School Zip Code (Text)(500 character maximum)	Instructions:		
* School Phone Number (Text)(500 character maximum)	Instructions:		
Employment Information			
* Official Position of Person Who Can Verify Applicant's Employment and Proposed Fund Usage (Single-Select List)			
Superintendent	Instructions:		
Principal			
Immediate Supervisor			
* First Name of the Person Indicated (Text)(500 character maximum)	Instructions:		
* Last Name of the Person Indicated (Text)(500 character maximum)	Instructions:		
* Title of the Person Indicated (Text)(500 character maximum)	structions:		
* School Email Address of Person Indicated (Text)(500 character maximum)	Instructions:		
* Verify School Email Address of Person Indicated (Text)(500 character maximum)	Instructions:		
* Direct School Phone Number of Person Indicated (Text)(500 character maximum)	Instructions:		
	Instructions:		
	•		
	About Your Class		
* If awarded, what grade(s) will you be teaching? (Checkbox List)			
Transitional Kindergarten			
Kindergarten1st grade	landou eticano		
• 2nd grade	Instructions:		
3rd grade			
4th grade			
5th grade			
*If other, please specify (Text)(500 character maximum)	Instructions:		
* Expected Number of Students in Your Class	Instructions:		
(Number)(15 character maximum)	Please answer to the best of your ability; an exact number is not required		
As a limit of the control of the con	Instructions:		
* Expected Number of Native Spanish Speakers in Your Class (Number)(15 character maximum)	Please answer to the hest of your ability an exact number is not required.		
,	 Please answer to the best of your ability; an exact number is not required 		

* When is the last day of school? (Date)	Instructions:	
Proposal		
Project Title (Text)(255 character maximum)	Instructions:	
(Text)(200 character maximum)	Instructions:	
* I would like to purchase the following with a Read Conmigo grant (Single-Select List)		
Classroom resources, tools, and materials		
Professional development	Instructions:	
Both classroom resources, tools, and materials AND professional development		
Classroom resources, tools, and materials (Checkbox List)		
Audiovisual equipment		
• Books		
Computers		
Field trip(s)	Instructions:	
Furniture	Select all that apply.	
• Games		
Lesson plans		
Manipulatives		
Technology		
• Other		
*Professional development		
(Checkbox List)	Instructions:	
 Conference(s)/Seminar(s)/Workshop(s) 	instructions.	
Continuing Education Course(s)	Select all that apply.	
• Other		
*Both classroom resources, tools, and materials AND professional development (Checkbox List)		
Audiovisual equipment		
Books		
Computers		
Conference(s)/Seminar(s)/Workshop(s)		
Continuing Education Course(s)	Instructions:	
Field trip(s)	Select all that apply.	
Furniture	Select all triat approx.	
• Games		
Lesson plans		
Manipulatives		
Technology		
• Other		
* If other, please specify (Paragraph)(4000 character maximum)	Instructions:	
* How do you intend to use the grant funds to benefit bilingual students and their	Instructions:	
experiences in the classroom?		
(Paragraph)(4000 character maximum)	 This response should align with all items requested in the application budget. 	
* What are your goals for your students, and how will the funds help to achieve	Instructions:	
your goals?	Please be specific.	
(Paragraph)(4000 character maximum)	· ·	
* What are the formal ways you plan to measure the impact of the grant?	Instructions:	
(Paragraph)(4000 character maximum)	Ex: standardized testing, quizzes, online assessments, etc.	
	Instructions:	
* What are the informal ways you plan to measure the impact of the grant?		
(Paragraph)(4000 character maximum)	Ex: observation, feedback, testimonials, etc.	
If you would like to include additional documents to support your application, please upload here.	Instructions:	
(File Upload)File Upload; 5242880 byte limit		
* Grant Amount	Instructions:	
(Currency)(20 character maximum)	•	
* Budget	Instructions:	
(Worksheet)	mad dedoria.	
	•	
	When completing the budget below, please consider the following:	

- All items in budget should be included in the narrative questions above
- Please include tax estimates within each line item
- Links to shopping carts will not work; please link to individual items instead
- If your link exceeds the character limit, please use a URL shortener to shorte your link

Tot	* Item Quantity	* Item Cost	* Item Description	* Item Link	* Item Name
Total:					

* Budget verification (Checkbox List)

> I acknowledge that my application may not be considered if my budget does not equal \$3,000.

Instructions:

Acknowledgement

* Acknowledgement

above statements.

(Checkbox List)

Instructions:

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If you receive a Read Conmigo grant from The Kemper Foundation, you agree to the following:

- Funds must be used in alignment with the submitted application and budge
 If budget needs have changed, recipients must request approval from The
 Kemper Foundation for any items not originally included in the budget. To
 request a change, recipients can contact The Kemper Foundation at
 readconnigo@thekemperfoundation.org. All changes must receive approva
 prior to purchase.
- Grant funds must be expended within 90 days of receiving payment unless funds are for a time-specific event (i.e., expenses related to a field trip or a professional development conference).
- You must complete an outcome report detailing the impact of their grant ar
 use of funds. The Kemper Foundation will send recipients a reminder 30 day
 prior to the due date with a link to the report form. Recipients must keep all
 itemized receipts from grant-related purchases and submit them with the
 outcome report. Please note that submitted receipts must total \$3,000.
- If you leave your school before the end of the academic year, you must noti
 The Kemper Foundation within 10 days of giving notice to their school.
 Unused grant funding may need to be returned to The Kemper Foundation;
 this will be decided on a case-by-case basis.
- Should you or your school choose to share with The Kemper Foundation
 photos of a class, students, or other elements related to Read Conmigo, or
 comments about the program, permission is granted to The Kemper
 Foundation to use these items for the purpose of promoting the charitable
 aims of the Foundation and its philanthropic partners. You and/or your
 school are responsible for obtaining the proper parental permissions/photo
 releases specific to your school before materials are sent to The Kemper
 Foundation.
- I have reviewed The Kemper Foundation's privacy policy.

(Checkbox List)

 I verify that this application has been completed and submitted by the person applying for the grant

• I certify that the information in this application is accurate & I agree to the

Instructions:

Need Support?
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