

Read Conmigo School Impact Grant Application

APPLICATION OVERVIEW

Thank you for your interest in the Read Conmigo School Impact Grant. This application is designed to provide The Kemper Foundation with a comprehensive understanding of your school's proposed initiative(s) and how it aligns with our goal of advancing dual-language education for bilingual students.

The application consists of six sections:

1. **Contact Information:** Details for key school personnel.
2. **About Your School:** Information on your school's demographics and dual-language program.
3. **Proposal:** SMART goals, activities, expected impact, and evaluation of your school's proposed initiative(s).
4. **Budget:** An itemized breakdown of your \$10,000 funding request.
5. **Attachments (Optional):** Supporting materials, such as videos, letters of support, or other relevant documents.
6. **Acknowledgement:** Confirmation and submission of your application.

Please review the application carefully and provide detailed, thoughtful responses. For questions during the application process, consult our [FAQs](#) or email us at readconmigo@thekemperfoundation.org.

CONTACT INFORMATION

Principal

***Principal First Name:**

***Principal Last Name:**

***Principal Email Address:**

***Principal Direct Phone Number:**

Principal Phone Extension:

Assistant Principal

***Assistant Principal First Name:**



***Assistant Principal Last Name:**

***Assistant Principal Email Address:**

***Assistant Principal Direct Phone Number:**

Assistant Principal Phone Extension:

Additional Contacts

If additional staff have contributed to this application (e.g. school librarian, media specialist), please include their contact information below.

Additional Contact 1 First Name:

Additional Contact 1 Last Name:

Additional Contact 1 Title:

Additional Contact 1 Email Address:

Additional Contact 1 Direct Phone Number:

Additional Contact 1 Phone Extension:

Additional Contact 2 First Name:

Additional Contact 2 Last Name:

Additional Contact 2 Title:

Additional Contact 2 Email Address:

Additional Contact 2 Direct Phone Number:

Additional Contact 2 Phone Extension:

***How did you hear about the Read Conmigo Grant Program?**

Colleague

Community Organization

(conditional) If community organization, specify which organization:

District Office

(conditional) If district office, specify which district office:

Email from The Kemper Foundation

Kemper Agent

(conditional) If Kemper Agent, specify the name of the agent (enter n/a if unknown):

Kemper Employee

(conditional) If Kemper Employee, specify the name of the employee and/or their role (enter n/a if unknown):

News Outlet

(conditional) If news outlet, specify which outlet:

Professional Organization

(conditional) If professional organization, specify which organization:

Social Media

(conditional) If social media, specify which platform:

Other

(conditional) Explain how you heard about the Read Conmigo Grant Program:

ABOUT YOUR SCHOOL

School Details

***School District:**

***School Type:**

Public

Charter

***School Name:**

Enter the full, formal name of the school.

***School Address 1:**

***School Address 2:**

***School City:**

***School County:**

Broward County

Dallas County
Hidalgo County
Los Angeles County
Miami-Dade County
Orange County
Riverside County
San Bernardino County
Ventura County

***School State:**

California
Florida
Texas

***School Zip Code:**

***School Website:**

***School Phone Number:**

***School Mission:**

Student Demographics

***Total Students Enrolled:**

***Percentage of Students Receiving Free or Reduced-Price Lunch:**

Enter the percentage as a whole number without the % symbol.

***Approximate Percentage of Students Who Are Native Spanish Speakers:**

Enter the percentage as a whole number without the % symbol.

***Approximate Percentage of Students Who Are Native English Speakers:**

Enter the percentage as a whole number without the % symbol.

***Approximate Percentage of Students by Race:**

Enter the percentage as a whole number of each population. If your school doesn't collect this information, enter 100 in the "Untracked" category.

American Indian or Alaska Native:

Asian or Asian American:

Black/African-American:

Hispanic or Latino:

Native Hawaiian or Other Pacific Islander:

Two or More Races:

White:

Other:

(conditional) If other race, please specify:

Untracked:

Dual-Language Program Details

***Describe your school's dual-language program.**

Include the percentage of your school population that participates in the program.

Suggested Response Length: 150 words

***Years Your School Has Operated the Dual-Language Program:**

#

PROPOSAL

***Project Title:** Read Conmigo School Impact Grant 2025

***Grant Amount:** \$10,000

***Provide a one-sentence summary of your Read Conmigo School Impact Grant request:**

***Our school would use a Read Conmigo School Impact Grant to support *(multi-select)*:**

Resource and Technology Improvement

Instructional Support and Professional Development

Community and Cultural Engagement

Other:

(conditional) If other, describe what your school would use the grant for:

*** Approximate Number of Students Impacted by This Funding**

#

About Your Proposed Initiative(s)

Provide detailed responses to the questions below and complete the goals chart to outline the goals, activities, expected impact, and evaluation of your proposed initiative(s).

***Proposed Initiative(s):**

Describe your school's proposed initiative(s) and explain how it will advance dual-language education for bilingual students.

Suggested Response Length: 250 words

***SMART Goals & Activities:**

Identify 1-3 SMART goals for each proposed initiative and detail at least two key activities your school will implement to achieve each goal during the upcoming school year.

SMART: specific, measurable, attainable, relevant, and time-bound

Suggested Response Length: 250 words

***Expected Impact & Evaluation:**

Describe the expected impact of your proposed initiative(s) on students, educators, and the broader school community and explain how you will evaluate its success in the upcoming school year. Please use both formal (e.g., assessments, surveys) and informal (e.g. observations, community feedback) measurements.

Suggested Response Length: 300 words

***Proposed Initiative(s) Summary Chart**

Complete the following chart to concisely summarize your SMART goals, activities, expected impact, and evaluation. If awarded, this chart will serve as the foundation for your grant impact report at the end of the school year.

Note: Each box is limited to 250 characters. If additional space is needed, you may repeat your SMART goal in a second row to allow more space for activities, expected impact, and evaluation.

Goal Number	SMART Goals	Activities	Expected Impact	Evaluation
Example: 1	Example: Enhance the school library by increasing the availability of bilingual books by 30% and creating a welcoming reading environment with new seating by June 2026	Example: By November 30, 2025, purchase 500 bilingual books (targeted by grade level and interest) By December 15, 2025, install new shelving and seating	Example: 20% increase in book checkouts 10% more class visits to the library Improved teacher satisfaction with the library and its resources	Example: Track book checkout data Monitor class visit data Conduct teacher satisfaction survey in May 2026

***Long-Term Impact & Sustainability**

Describe how your proposed initiative(s) will create lasting benefits beyond the school year.

Explain how your school plans to sustain and build on the impact of this work.

Suggested Response Length: 300 words

BUDGET

Budget

Complete the budget template below by providing the following for each requested item:

1. **Item Name:** Clearly identify the item.
2. **Item Description:** Briefly describe the item's purpose.
3. **Item Link or Attachment:** Provide a webpage link to the item or write "see attachment" if submitting an invoice, quote, or screenshot.
4. **Item Cost:** Enter the cost of one item, including estimated taxes and any applicable fees (e.g., shipping costs).
5. **Item Quantity:** Specify the number of items requested.
6. **Total:** This field will be automatically calculated by the grants portal.

Notes:

- *Links to shopping carts or travel websites do not retain your information. For these items, attach a screenshot to capture large carts (e.g., book purchases) or detailed estimates (e.g., flights, hotels).*
- *Each box is limited to 250 characters. If your link exceeds this limit, use a URL shortener.*

*Item Name	*Item Description	*Item Link or Attachment	*Item Cost	*Item Quantity	*Total

Optional Budget Attachment(s):

If applicable, upload supporting invoices, quotes, and/or screenshots. Clearly label all attachments for easy reference.

***District Policy Alignment:**

(check box) I affirm the budget aligns with district policy (e.g., district-approved items and vendors).

***Budget Acknowledgement:**

(check box) I acknowledge that this budget must total \$10,000 to be considered.

ATTACHMENTS (OPTIONAL)

Video:

Include a link to a video (max. three minutes) about your initiative(s) by uploading the video to Google Drive, YouTube, or Vimeo. Ensure the link is accessible to the public.

Letters of Support:

Upload letters from community members, parents/caregivers, district officials, or partners.

Additional Attachment(s):

Upload other relevant documents to support your application.

ACKNOWLEDGMENT

***Read Conmigo School Impact Grant Acknowledgment**

By submitting this application, the principal agrees to:

1. **Use of Funds:** All expenditures must align with the approved application and budget. Any changes must be pre-approved by The Kemper Foundation.
2. **Fund Expenditure Deadline:** Use all grant funds by December 31 of the award year, unless designated for a time-specific event.
3. **Grant Impact Report:** Submit a grant impact report by June 1 following the end of the school year in which the grant was awarded.
4. **Documentation of Expenditures:** Retain and submit itemized receipts and vendor invoices totaling \$10,000.
5. **School Allocation:** Funds are allocated to the school and remain with the school regardless of changes in leadership.
6. **Sharing of Photos and/or Videos:** Should you or your school staff choose to share with The Kemper Foundation photos and/or videos of a class, students, or other elements related to the Read Conmigo Grant Program, 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. The principal and/or school staff are responsible for obtaining the proper parental permissions/photo releases specific to your school before materials are sent to The Kemper Foundation.
7. **Privacy Policy:** I have reviewed The Kemper Foundation [privacy policy](#).

(check box) I agree to the above statements.

***Read Conmigo School Impact Grant Application Verification**

(check box) I verify that this application is correct and submitted by the principal on behalf of the school.