

TSET Healthy Incentive Grant Program for Districts Application

Please note: Smartsheet web forms do not allow the saving of data, so all information must be entered and submitted at one time. For technical assistance with submitting an application, contact grantsmanagement@tset.ok.gov.

Organization Information

INFORMATION ONLY

Official District Name * Fill in the official name of your school district, such as Oklahoma City Public Schools, Durant Independent School District, or Choctaw-Nicoma Park School District.	Online applications will only be considered for grant award. No
Authorized Official Name * The authorized official is the person who has the authority to enter into contracts on I	paper applications will be accepted behalf
of the district, as well as the first point of contact for all things related to this grant.	
Authorized Official Title *	
Authorized Official Phone Number *	
Authorized Official Email Address *	
Mailing Address *	
County *	
Organization Phone Number *	
Applicant Information (If different from Authorized Official)	
Applicant Contact Name	
Applicant Contact Title	
Application Contact Phone Number	
Application Contact Email Address	
Intended Use of Funds	
Project Title * In 10 words or fewer, please give your application a description that could be used fo summary publications (e.g., Health Education Curriculum, Cafeteria Cooler & Cooking Utensils, Safe Crosswalk Improvements).	r D
Project Description * Provide a brief description of how TSET funds would be utilized.	
Incentive Level(s) For Which You Are Applying *	
District Information	•
District Enrollment * Use data as submitted to Oklahoma State Department of Education (OSDE) for 2019- School Year.	2020
District Type * Select	•
Superintendent Name *	
Superintendent Phone Number *	
Superintendent Email Address *	
Budget Information	
Total TSET Funding Amount Requested *	
Will These Funds Be Used At Multiple School Sites? *	
Select	•
Is Project Related to or Part of a Larger Project? * Select	· (**)

File Upload * STOP! Please carefully read the information below and ensure all documents (submitted in

- .pdf format) are included in your application. Each application should contain a minimum of 5 documents:

 - Attachment A, Non-acceptance of Tobacco Funds form
 District's 24/7 tobacco-free policy
 District's Wellness Committee documentation
 - 4. Child Nutrition Program Administrative Review documentation 5. District's Wellness Policy

Drag and drop files here or browse files

Send me a copy of my responses