



**Tehama County
Department of Education
Grant Review Protocol**

All department grants shall be submitted to
Human Resources, Business and
Administration offices

**Review and approval due
two weeks prior to submission for funding**

Department: _____

Contact: _____

Grant Title: _____

Grant Life: _____
(Ex: 1 year, 2 years, etc.)

Amount of Funding: _____

Original: Department
CC: Business

Human Resource Services:

1. Does this grant proposal impact staffing? Yes No
 - a. If so, are the proposed positions aligned to the TCDE Salary Schedule? Yes No
 - b. Are the proposed positions aligned to current TCDE Job Descriptions? Yes No

HRS approval: _____
(Initials / Date)

Business Office:

1. What is the in-kind contribution? _____
2. What is the indirect rate? _____
3. Is there a hard dollar match? Yes No
 - a. If yes, how much? _____
4. Are stipends included in the proposal? Yes No
 - a. If yes, do they run through the district or TCDE? District TCDE
 - b. Do they include statutory benefits? Yes No
5. For fixed multi-year grants, how does the proposal address PERS/STRS increases?

Business approval: _____
(Initials / Date)

Administration:

1. How does the proposal align to TCDE purpose and the LCAP?

2. Are there metrics to measure success? Yes No
3. What will be the impact on physical space (office, storage, etc.)? _____

Administration approval: _____
(Initials / Date)