

2025 - 26 Grant Application

Community Matters is fortunate to have generous partners that invest funding to support school and district efforts to create safe, welcoming and inclusive schools for all. Funding may be available in your area to support implementation of our evidence-based Safe School Ambassadors® (SSA) Program and/or other eligible programs. To determine if your school qualifies for funding to support SSA or another Community Matters program, please complete and sign this Grant Application and Agreement

School:		District:			
City:			tate:	Zip:	
Applicant Name:					
Phone:	Email:	_ Email:			
Principal Name:		Email:			
Grades of School:	# of students:	# of c	_# of campus staff:		
% of Free/Reduced Lunch:	School De	mographics:			
Person(s) at district level responsame:	• ,				
	ool is on a year-round cal				
•	ool has an active Safe Sc		(SSA) pro	gram on campus	
# of Ambassado	ors# of Adults	# of years S	SA has bee	en on campus	
	ool had the program in the			•	
Please list other student foci PBIS, assemblies, mentoring					
This funding request is for the	ne following program(s):				
☐ Safe School Ambassa	dors® Program (requires	completion of page	es 2 and 3)	
☐ Other Program(s) For a list of programs and s Programs-and-Services-with	ervices click here: https://com	mmunity-matters.org/w	p-content/up	oloads/2025/06/2025-26-	
Program cost:					
*Amount school can pa	y:				
Total grant request:					
*It is highly recommended that the sci	hool make some type of investn	nent toward to the total co	ost of the pro	gram when possible.	
Signature and Agreement: By subn grant application as designed and with	nitting this application, if funded	, we commitment to imple			

_____ Title: _____

Signature:

Date: _

Safe School Ambassadors® Program Grant Applicant Agreement

The following checklist is designed to ensure the best possible outcomes and results from the Safe School Ambassadors (SSA) Program. Please read and check the boxes to indicate understanding and agreement.

Our School agrees to implement SSA Program with fidelity which includes the following:							
•	ration: Recruiting/Selecting Students and Staff Nominate potential students representing all the various social/influential groups on campus.						
	Conduct an orientation for the Ambassador nominees to describe the program and generate interest.						
	Select a diverse group of 30-40 students to be trained. Take 15 minutes at a staff meeting to explain the SSA Program, the role of the Program Advisor (PA) as well as the characteristics of an Ambassador.						
	ng Days Identify/reserve 2 full school days for the SSA Training (no early release or minimum						
	days) that are back-to-back within the time period specified by the funder.						
	Provide a 1:6 ratio of adults to students to attend the training. Secure substitute coverage (if applicable), supplies for training, and adequate room space (based on room configuration).						
	Training: Program Implementation chool has the support of the principal & commitment of adult leaders to:						
(chec	call that apply)						
	Meet with Ambassadors for 30-45 minutes (weekly for the first 4 weeks after the training, and then every other week) during the school day.						
	Meet with PA & Family Group Facilitators every other month, to connect and assess plan.						
	Conduct a minimum of two All-Ambassador meetings/events annually.						
	Recognize and celebrate Ambassadors and SSA Adult Leaders at least once annually.						
Program Assessment/Data Collection Agreement Our school agrees to collect & submit data to measure the program/services, which includes:							
	Program evaluations upon completion of training/service						
	Measure and report Ambassador interventions through a twice annually Action Snapshot Campaign or collection of Ambassador Action Logs						
	Year-End Survey completion by both Ambassadors and SSA Program Leaders						
	Submission of a Principal Letter of Support/Impact at the end of the school year. Submit Baseline and Annual discipline data including suspension numbers						
unders	tand and commit to implementing the items listed above to the best of my ability if grant request is d:						
Signati	re· Title· Date·						

Community Matters Partner Agreement

[Date]

To Whom It May Concern:

On behalf of [Insert School Name], I express our intent to partner with Community Matters to implement the Safe School Ambassadors® Program at our school. We are in agreement with the project goals, objectives and outcomes. In adhering to the grant guidelines, we agree to do the following to implement the Safe School Ambassadors® Program with fidelity:

- Assign a Program Advisor for our school and recruit adults to attend the training and serve as year-round Family Group Facilitators;
- Provide a space for training on campus;
- Identify and select 30-40 socially influential students to participate in the program;
- Provide lunch for participants on the days of the training and cover the costs of substitutes should they be needed to cover for teachers who attend the training;
- Collect and submit data to measure program impact through the following methods:
 - Conduct at least one Action Snapshot Campaign that measures student interventions.
 - Completion of the Year-End Survey provided by Community Matters to garner feedback from Ambassadors and program adults.
 - Submission of a Principal Letter of Impact at the end of the year.

We look forward to the opportunity to implement the Safe School Ambassadors® Program at our school and are excited about the positive impact it can make on the climate and culture of the school which can lead to overall increased school performance.

If you have any questions or comments regarding our support of this project, please contact me at [Add contact phone and e-mail here]

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Name:

Title: