



Inspiring Educators Application Guidance

Question 1. Contact Information

Please fill out this section entirely. A school address must be listed; we will not ship items to a personal/home address. Please utilize your school email address. A personal cell phone is ok to use as the phone number.

Question 2. How long have you been teaching?

This is a general question of how long you have been teaching for your entire career, not just at the current school.

Question 3. What do you teach? Please include Grade and subject.

This is a general question to see what grade and subject(s) you teach currently.

Question 4. What inspires you to teach?

There is no right or wrong answer to what personally inspires you. We are looking for answers that give us details about what made you decide to become a teacher, what makes you continue to teach, and how you inspire your students.

Question 5. Share what you have done for your classroom/students, and why?

We want to know what you are currently doing in your classroom and for your students that inspires them to come to school. We want to see through your answer that you are dedicated to teaching.

Question 6. Describe the curriculum/tools/resources needed for your classroom, and how it will impact your students? Be detailed yet concise. For new programs, has school administrative staff approved the program? Please note that for 2024, we will utilize Amazon for all purchases.

This question is your moment to sell us your program/project. Think BIG – how would you spend \$2,500? Please tell us what you are doing, why you are doing it, and how you are impacting the students with the project. In your answer, how would you spend \$500 if you were not awarded the first-place prize? For new programs, please include a statement that school administrators have reviewed and approved your program.

Question 7. BHHS Legacy Foundation’s mission is “enhancing the quality of life and health of those we serve. The following focus areas guide us in this mission. Please select which focus area your proposed program fits.

Possible Answers are below. You will only be able to select one.

Increase access to healthcare,
Improve community health,
Expand Arizona's Healthcare workforce, or
Strengthen the community.

Question 8. I understand and agree to submit a final report detailing how the funds were spent and the impact of the grant. I acknowledge that photos will be required as part of this final report.

Please select yes that you agree to this term or no that you don’t agree. The final report will be emailed to all winners in December.

Question 9. I have read and agree to the Inspiring Educators Terms & Conditions, including the restriction regarding family of Foundation staff and Board members.

Please select yes that you agree to this term or no that you don’t agree. The Terms & Conditions are on the website. Please make sure to read and understand them fully before answering this question.