



GRANT APPLICATION

Name of Organization: _____

Two Contacts:

Name: _____ **Position:** _____
Phone #: _____ **e-mail:** _____

Name: _____ **Position:** _____
Phone #: _____ **e-mail:** _____

Description of Project (*Briefly describe the community service for which money is needed as well as how the money will be used to help your organization involve students to benefit the community.*):

Project costs (*List a line item budget*):

Total: _____

Amount of money requested? _____ **Number of students to be involved?** _____

Number of students to be impacted? _____

Sources of additional money? _____

Signature of person completing application: _____ **Date:** _____

Sponsor's signature: _____ **Date:** _____

Please feel free to continue on the back if additional space is needed.

For office use only: Grant approved (circle one): Y / N Amount granted: \$ _____	Date approved: ____/____/_____ Date paid: ____/____/_____ Initial:
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