GRAND VALLEY EDUCATIONAL FOUNDATION

EDUCATIONAL GRANT APPLICATION

PLEASE PRINT OR TYPE ALL INFORMATION

DATE SUBMITTED:_____

GRANT REQUESTOR(s):_____

SCHOOL & LEVEL:_____

REQUESTOR(s) CONTACT INFORMATION:_____

NAME OF PROJECT:_____

STARTING DATE OF PROJECT:_____

ENDING DATE OF PROJECT:_____

OBJECTIVE(S) OF PROJECT:_____

SUMMARY/DESCRIPTION OF PROJECT:_____

Course Standards or Learning Targets that grant will support: _____

COMMUNITY RESOURCES TO BE UTILIZED, IF APPROPRIATE OR NEEDED:_____

BUDGET FOR PROJECT (Please submit a detailed list, use an additional sheet if necessary)

a. Supplies and Materials ..... $_____

b. Equipment ..... $_____

c. Travel (Field Trips, other) ..... $_____

d. Fees ..... $_____

e. Other sources of income for project

Source Staffing/Tutoring Costs.....Amount $_____

Source.....Amount $_____

TOTAL COST.....$_____

Have you solicited any funding from any other source? If so, from whom, for how much, were you approved or denied and why?_____

_____

_____

_____

_____

The Grand Valley Educational Foundation is a 501 (C) 3 Non-Profit Public Corporation and therefore, must account for all of its funds to the Internal Revenue Service. All Grant recipients are required to maintain a detailed accounting of all expenditures. In addition, all grant recipients are required to submit a Final Report including detailed expenditures, # of students involved, project summary, and successes and failures of the project. *Please submit a "Final Report" and any photos available within THIRTY DAYS following the conclusion of the* ***project.*** **If a report is not provided, future funds may be withheld for other projects.**

Applicants Signature: _____ Date:_____

This project is in concert with the strategic plan and I support this project.

Principal's Signature: _____ Date: _____

Superintendent (or designee) Signature: _____ Date: _____

Email to: Dr. Jennifer Baugh <jbaugh@garfield16.org> Or Mail to:

Grand Valley Educational Foundation

P.O. Box 682

Parachute, CO 81635