

# 2019 - 2020 MINI GRANT APPLICATION FORM



To fill out this form, click and type on the gray boxes. Please include your responses to each question only on this form.

Project Title:

Submitted By:

Submitter's Title:

Date Submitted: mm/dd/yyyy

VCSC Email:

School:

Project Category:

C (Classroom)

G (Grade Level)

S (Schoolwide)

Indicate if Other:

Budget Request:

Have you applied for this project before?

Was your application approved?

**ELECTRONIC APPLICATIONS RECEIVED AFTER 2/15/19 WILL NOT BE CONSIDERED.**

Please provide a one sentence summary of your project:

Statement of Need:

Goals:

Methods:

Significance of Project:

Student Learning Outcomes:

Grade and Approximate # of Students Served:

Budget (**Please provide very specific, detailed budget figures**):

Plan of Evaluation:

If applicable, provide an impact statement to justify continuation of the project:

Please provide a one paragraph summary of the proposed project including the project goals, student learning outcomes, and need. This summary may be used to promote your grant.

Please send **2 copies** to the Vigo County Education Foundation, at P.O. Box 3703, or send by school mail to Jennifer Kirsch at the VCSC Administration Building, on or before **February 21, 2019**. Only the mailed copies require applicant/principal signatures.

Applicant's Signature:

Principal's Signature: