



Organization Name:

Physical Address:

City, State, Zip:

Phone:

Mailing Address (if different):

Organization's Website:

Tax ID # or Name of Fiscal Agent:

Grant Contact Name/Title:

E-mail:

Cell #:

Executive Director Name:

Check Which:

- Summer Program School Year Program
 Development of Foundational Reading and Writing Skills
 Implementation of Cross Disciplinary and Project-Based Learning Through STEAM
 Wraparound Services that Ensure Students are Healthy, Engaged, Supported, and Challenged

Project Title:

Amount Requested:

Total Project Budget:

Organizational Budget:

We confirm that the information provided is accurate and that the enclosed proposal is complete (electronic signatures accepted).

Executive Director:

Board President:

For Office Use Only	Funding Focus	Geographical Focus
Meeting Date:	<input type="checkbox"/> Development of foundational reading and writing skills <input type="checkbox"/> Implementation of cross disciplinary and project-based learning through STEAM	<input type="checkbox"/> Alameda County, California <input type="checkbox"/> Cuyahoga County, Ohio <input type="checkbox"/> Dona Ana County, New Mexico <input type="checkbox"/> Hartford County, Connecticut <input type="checkbox"/> King County, Washington <input type="checkbox"/> Lorain County, Ohio <input type="checkbox"/> Pima County, Arizona <input type="checkbox"/> San Francisco County, California
Docket #:	<input type="checkbox"/> Wraparound services that ensure students are healthy, engaged, supported, and challenged.	
Staff:		