

Please describe how this grant would be used to supplement the students' education inside or outside of the classroom: _____

Number of Students Impacted: _____

Grade Level(s): _____

Estimated Start Date: ____/____/____

How long can this project continue to be utilized? _____

Plan for Maintenance Costs and Additional Supply Costs (Please note that these costs are not covered by the Foundation): _____

Will staff require training? _____ (Please note that training costs are not covered by the Foundation)

If so, how will it be completed? _____

Grant Request Amount: _____ *****Please provide an itemized list of costs*****

(If needed) Technology Dept. Signature: _____

Principal's Comments: _____

Principal's Signature: _____

Superintendent's Comments: _____

Superintendent's Signature: _____

Completed Applications should be returned no later than December 19, 2025