

2: Your Organization 3: Your Program 5: Agree & Submit

1: Contact Info

1 Contact Info

4: Structure & Budget

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	1. Contact into	
	Applicant Name	
	Your Name	
	Job Title	
	Job Title Your Job Title Telephone Number (###) ###-####	
	TOLE	
	Telephone Number (###) ###-####	
	Email Please make sure you have continued access to this email account.	
1: Contact Inf	o 2: Your Organization 3: Your Program 4: Structure & Budget 5: Agree & Submit	Show All Pages
	2. Your Organization	
	Organization Name	
	Organization Type	
	Public School	
	Address 1	
	Address 2 Address 2	
	Address 2	
	Address 2	
	SAI	
	City State Zip Code	
	City	
	Describe the community that your organization serves. (100 words or less) Please include the size, location (rural, urban, suburban), economic and demographic makeup of your	
	community.	
	100 Words Left	
	Has your organization received an EJK Mini-Grant in the past?	
	YesNo	
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	3. Your Program	
	o. roa. rog.a	
	Name of the program:	1
	Is this a new program?	
	YesNo	
	Areas of learning addressed by program (for example, art, STEM, social, emotional)	,
	What is the step by step plan for your program? (100 words or less)	
	TORIVI	
	What are the expected outcomes of your program? (100 words or less)	
	100 Words Le	ft
	What are the expected outcomes of your program? (100 words or less)	1
		,
	100 Words Le	ft
	Do you plan to collaborate with another educator or exceptantica?	
	Do you plan to collaborate with another educator or organization? Yes No	
	If not funded by a Mini-Grant, will the program go forward? O Yes O No	
1: Contact Inf		Show All Pages
	4. Structure & Budget	
	Number of students participating:	
	Grade(s):	
	What season will you run your program?	
	 Fall Winter Spring Summer 	
	Number of educators/adults presents	
	Number of educators/adults present:	
	Length of each session:	
	Length of each session:	
	SAIVI	
	Number of Sessions	
	Session Frequency	
Costs		

Materials

Materials must be itemized.

Not eligible: Costs for general operations, transportation, salaries, material intended for reuse or sale.

3: Your Program

Material 1

Material

1: Contact Info 2: Your Organization

5. Agree & Submit
Please initial in the boxes next to the following statements to confirm that you understand and agree with the terms. After you have agreed, you will be invited to review your application before you submit.

Needed

Needed

4: Structure & Budget

Cost Per

Cost

5: Agree & Submit

Material Subtot

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I understand that this project must be COMPLETELY and EXCLUSIVELY funded by the EJK Mini-Grant, and that no other funds will be used the program. The Foundation will request the return of funds for failure to comply with these guidelines.

If I receive a Mini-Grant, I understand the Final Report is due on June 1.

I understand that if this proposal is accepted, I give permission for my Final Report to be used in publicity, articles or presentations, onli and in print. My name and the name of the organization will be attached wherever the report is posted.

I confirm that I belong to the organization named above and will use the funds awarded for the educational program herein described.