

## **Grant Application Form**

Basic Info					
Teacher Name		Project Title			
School/Principal	Grade Level		Phone#	Phone#, e-mail address	
Description of Project					
Items Needed and Co	agt				
Item Needed and Co	JSt	Cost			
	Total Cos	st			
Describe any other funding s	sources and their amounts				
Intended Recipients ☐ Single Classroom	of GEF Grant (Check	All That A	Apply)		
☐ Entire Grade or Depar	rtment				
☐ Single Elementary Scl	nool				

☐ Northside Elementary				
☐ Millikin Elementary				
☐ Southwest Elementary				
☐ Geneseo High School				
☐ Geneseo Middle School				
Number of Years Initial Funding Will Cover How many years can this grant sustain projects without additional funding?				
Total \$ Requested	Total Number of Students Impacted			
Total \$ per Student for Impact				
Is This a New Project Proposal?				
□Yes				
☐ No, but not funded before by GEF				
☐ No, and funded before by GEF				
Please attach link to website with detailed information when applicable.				
	<del></del>			
Principal's Signature				

GEF reserves the right to decline grant requests received after the established deadline.