



SMALL GRANT APPLICATION

Print the Grant application, complete, and mail to: Saucon Valley Foundation for Educational Innovation, 2097 Polk Valley Road, Hellertown PA 18055

Check one: Mini-grant (\$200-\$750) Collaborative Grant (\$200-\$1,500)

Date _____

Applicant's Name

Home Address

Home Phone

School Phone

Position

Building

Subject Area/Division

Project Title

\$ _____
Budget Request

Brief Description of Project (please attach further documentation if necessary)

Building Principal's Signature
(or Supervisor)

Applicant's Signature

If you have questions or need assistance, please call Leslie O'Connell at (610) 838-2861 or email at leslieoc@ptd.net.

Applicant's Name _____ Date _____

1. When do you anticipate implementing and completing the project? Is it associated with a particular unit/topic or month of the academic year?

2. Approximately how many students will be affected by the project?

3. What are the educational objectives of this project? (Examples—enhanced learning opportunities, enrichment, remediation, furtherance of curriculum, etc.)

4. What is innovative about the project?

5. Detail your Budget Request. Include specific information such as kinds of materials or equipment needed and sources of supplies and costs. Categories may include: materials; equipment; transportation; honoraria; refreshments; rental; etc.

CATEGORY	QUANTITY/ITEM	SUPPLIER	AMOUNT
Example: Materials	Six (6) Palette Boards	ABC Supply, Co.	\$96.00
TOTAL			