

## **SMALL GRANT APPLICATION**

Print, complete, and send the application to: Saucon Valley Foundation for Educational Innovation, Attention: Kathleen Prindible at the district office: kathleen.prindible@svpanthers.org

The maximum small grant award is \$3,000.							
Date	Building: Elementary Middle High School						
Applicant's Name							
Email Address							
Home Phone	Scho	ool Phone					
Subject Area/Division	<u> </u>	Project Title					
S Budget Request	Number of St	cudents affected by project					
Technology Request yes	no						
If yes, please obtain sign	ature of Mike Ha	anssen, IT Department, prior to submission.					
Brief Description of Proje	ct (please attach f	Further documentation if necessary)					
Building Principal's (or Supervisor	•	Applicant's Signature					
Mike Hanssen, Information	on Technology (if	applicable)					

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. What are the educational objectives of this project? (Examples—enhanced learning opportunities, enrichment, remediation, furtherance of curriculum, etc.)
- 3. What is innovative about the project?
- 4. 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	S	UPPLIER	AMOUNT
Example:				
Materials	Six (6) Palette Boards	ABC	C Supply, Co.	\$96.00
		-		
			1	
			TOTAL	

If you have questions or need assistance, please call Kathleen Dettmar at (610) 748-0083 or email at kathleen\_dettmar@hotmail.com.