Application Cover Sheet
Ludington Area Schools
Oriole Foundation
Teacher Mini-Grant
Fall 2019 – Due Date September 13, 2019

Date: _____

School Name: _____

Employee Name: _____

Grade Level: _____ and/or subject:_____

Telephone # (work extension):_____ home:_____

Email Address: _____

Project Name: _____

Amount Requested:_____

What other grants or other sources of funding have you been awarded in the last two years:

_____

_____

Project Type: (check one)

___ Art	___Foreign Language	___Professional Development
___ Business/Economics	___Mathematics	___Science
___Geography/Soc. Studies	___Reading/Language Arts	___Music
___Computer Science	___Physical Education	___Other_____

Project Description:
Please use a separate piece of paper (preferably no more than one page) attached to this cover sheet. Include: (1) goal(s) of project; (2) objectives and project description; (3) timeline of project; (4) how the project will be evaluated; (5) project budget (detailed listing of how the money will be spent); (6) Evaluation summary due 30 days following the completion of the grant project. Submission of your evaluation guarantees your eligibility for future Oriole Foundation grant consideration.

_____ _____

Employee Signature Principal/Administrator Signature

Oriole Foundation
Soaring Higher

Funding for this project is provided by: Ludington Area Schools Oriole Foundation & the Community Foundation for Mason County.