

Opportunity, Excellence and Tradition

2018-2019 GRANT APPLICATION

(Deadline: Monday, May 13, 2019, 5 p.m.)
Application must be word processed. Hand written applications will not be considered.

Date:	Funding Cycle:	SUM'18 (Check all that apply)	Fall '18	SP'19
Project Title:				
Applicant Name		Department		
Phone No. /Ext.:		E-mail:		
Co-Applicant Name		Department		
Phone No. /Ext.:		E-mail:		
Student Organizations Authorization	Faculty	/Staff Applicant Author	ization	
Faculty/Staff/Principal Sponsor	Applica	nt Signature		
Faculty/Staff/Principal Sponsor Signature	 Depart	ment Chair Signature		
	Princip	al's Signature		
Total Funds Requested: \$				
Department Coordinator who pays your invo	oices:			
Name	Email			
Are you a first time applicant for a grant from	n the Foundatio	n?Yes	No	
If no, what was your project name? What wa	as the amount o	f your award and when c	lid you receive the	e funding?
Previously funded project name	\$ Amoun		nat year did you re	 eceive funding?

THE PR	
1.	Describe the project for which funds are being requested. Include the project's history. If the project relates to the school's strategic plan or motto, please explain. (1,824 characters w/spaces; approx 300 words)
2.	What is your project timeline? Please be specific. (579 characters w/spaces; approx. 150 words)

3.	What are your measurable objectives? (1,515 characters w/spaces; approx. 250 words)
	2/4545 / 250
4.	How will you benchmark & evaluate your success? (1,515 characters w/spaces; approx. 250 words)
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THE PARTICIPANTS

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5.	How many NT students, faculty/staff, community members or others will be served be words)	y this grant? (421 ch	naracters; approx	. 60
	What is the grade level of students served? Check all that apply Freshman Other characteristics (gender, ethnicity, special needs, etc.): (max. 50 words)	_ Sophomore Jun	ior Senior	
THE FU	NDING			
6.	Have you approached the New Trier Administration for funding support?	Yes	No	
	And, if so, to whom have you spoken about your project?			
	Have you received financial support from the Administration?	Yes	No	
	And, in what amount? \$			
	Have other funds been raised or committed in support of this project?	Yes	No	
	How have the funds been raised; by whom and how much has been committed?			
7.	Will the funds support students/organization outside of District 203? Please explain. (579 characters w/spaces; approx. 100 words)	Yes	No	
8.	Itemized Budget Projection. List each item separately with estimated costs (Should you be due with your final report) (1,097 characters w/spaces; approx. 175 words)	our program receive	a grant; receipts	wil

12. In what quarter will you begin to use yo	ur funds?
Q1 – July-September '18	Q2 – October-December '18
Q3 – January – March '19	Q4 – April-June '19
ADDITIONAL INFORMATION TO SHARE (Optional	l) (2,145 characters w/spaces; approx. 350 words)

For Office Use:	
Grant Team Meeting:	
Grant Team Recommendation:	
Foundation Recommendation:	
Amount Awarded:	
Notification:	
Final Report Due:	
Grant Liaison:	