

Clearwater Foundation Grant Application
Spring 2017

The goal of this grant is to fund a project that improves the lives of students and enhances their educational experience.

Your name: _____

Grade level, group, and/or subject area to benefit from grant: _____

Your phone contact number: _____

Your email: _____

Total amount of project budget: _____

Amount requested from Clearwater Foundation: _____

- Checklist:
1. Cover page
 2. Narrative (no more than 2 pages)
 3. Budget page

Signature: _____

Total amount funded will be no more than \$400. Application must be received by Jan 14, 2017 to be considered.

Application must be delivered to Clearwater Foundation, PO Box 154, Piedmont, MO 63957

BUDGET:

Expense Category:	Amt requested from CSF:	Funds from other sources:	Total:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Narrative should include 1. Brief description of the need for which you are requesting funding. 2. Description of the primary goal of the project. 3. How was this need identified. 4. Include the project's proposed outcomes.

