

## **PROFESSIONAL TRAINING GRANT APPLICATION**

(This grant will be paid <u>after</u> an invoice is received for the training requested. Please seek employer financial input as well. We may not be able to cover the full amount as our funds available for this are limited.)

## **Personal/Employment Information**

Name	Email address
Street address	
City, state, zip code	
Current occupation	
Current employer	
Have you applied for support through this program be	fore?
Dollar amount requested for this application \$	
Program Information	
Training or program you wish to take	
	Dates of training or program
Location of training or program	
Please explain how this proposed training will expand space is needed, feel free to attach a longer description	your skills in a discipline related to our mission. If more n.

It is important to the grantor that the funding provided serve the lower Eastern Shore of Maryland, the Virginia Eastern Shore and/or lower Delaware. How will the expertise gained by this training directly serve residents of these areas? If more space is needed, feel free to attach a longer description.

Will the amount requested above pay all or part of the total cost of the training?

If this grant will not pay the entire cost, do you have other funding options?

If part, please explain how the balance will be covered.

Does the training provide continuing education units?

Date by which you need a decision on this application \_\_\_\_\_

Any funds granted as a result of this application, will be paid directly to the training provider unless other arrangements are made by the recipient.

The Jesse Klump Memorial Fund will require confirmation that the training was completed successfully, by either a certificate of completion or a grade report.

Please complete this application and either email it to weremember@jessespaddle.org, or mail it to: The Jesse Klump Memorial Fund, Inc. - PO Box 1786, Berlin, MD 21811

## Thank you for your interest in the Jesse Klump Memorial Fund Grant Program

The Jesse Klump Memorial Fund, a 501 (c)(3) nonprofit corporation, exists to end the tragedy of suicide, to provide a place of healing for those who have lost loved ones to suicide, to financially support scholars of any age who have demonstrated a desire to make the world a better place, and to provide grants for training for healthcare and education professionals dedicated to suicide prevention and mental health. ARE YOU CONSIDERING SUICIDE? WORRIED ABOUT SOMEONE? DIAL 988