

**Yakima Schools Foundation
Grant Application**

Date: _____

CONTACT INFORMATION

Name of applicant(s): _____

Mailing address: _____

Phone number: _____ Email: _____

Y.S.D. work site: _____

Position: _____

PROJECT INFORMATION

Project/activity name: _____

Date of project/activity: _____ Deadline for funding: _____

Principal or Program Director overseeing this project: _____

How many students will be served by this project/activity? _____

Have you had this project/activity in the past? If so, how was it funded? _____

FUNDING INFORMATION

Total amount of project/activity: \$ _____

Amount requested from the Yakima Schools Foundation: \$ _____

 Has this project/activity been previously funded by the Yakima Schools Foundation? Yes No

 Have you requested funding from other agencies/organizations at this time? Yes No

If yes, please list:

	Funding Source	Amount Requested	Outcome of Request
A.			
B.			
C.			

If the Yakima Schools Foundation cannot fully fund your request, how will this affect the project/activity?

Applicant Signature _____

Date _____

Principal or Program Director Signature _____

Date _____

Yakima Schools Foundation Grant Application

The following information may be submitted using the form below or you may create your own document.

BUDGET INFORMATION

List planned expenditures of the entire project including sales tax and costs beyond the scope of this grant. Highlight the total amount of Yakima Schools Foundation funds being requested.

Item Description	Store/Source	Quantity	Unit Cost	Sub Total
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			Overall Total	\$

Further Explanation if necessary:

PROJECT DESCRIPTION

Describe the project or activity:

Describe how the YSF funds will be used:

How does this program/project/activity enhance the educational experience for students?

How will you measure the impact of this project?