

**WEST GEAUGA
EDUCATIONAL
FOUNDATION**

Date _____

Applicant's Name _____

School: W.G. High School W.G. Middle School Lindsey Westwood

Program Title _____

Program Date _____

Grade/Subject _____

Number of Students Involved _____

1. What is the Time Frame? _____

2. What is the location? _____

3. What materials will you need to purchase? _____

4. What other assistance is required in addition to funding? Volunteers? _____

5. Is there a parent contact person? _____

6. How much will this program cost? _____

7. Date funds required by? _____

8. Payable to whom? _____

9. How will the money be used?

Fees _____ Materials _____ Transportation _____

10. Summarize in detail the idea, purpose/goals of the program?

11. What other areas of funding have been pursued? _____

12. How will you evaluate this program? _____

Principal's signature _____