



LCEF INDIVIDUAL/TEAM GRANT APPLICATION

2024~ 2025 SCHOOL YEAR

GRANT APPLICATIONS DUE October 3, 2024

Name	Building	
Grade/Subject Area	Number of students	
Title of Grant	School email	

This form is for **Individual or Team Grants ONLY**. Using your computer keyboard, place a check mark next to the grant you are applying for then and enter your grant information. **(Select only one per application)** You may also apply for any **Dedicated Grant** if your project meets the criteria. **Please use the Dedicated Grant Application to apply.**

Select the type of grant you are applying for (one type per application form).

<input type="checkbox"/>	Individual Teacher Grant	\$500.00
<input type="checkbox"/>	Team Grant (team of 3 or more teachers)	\$500.00

Describe your grant request, what will you do and why is it important? (Need)

What will the students do? activities

How will you measure the success of your grant? (measurable objective)

BUDGET (insert additional rows as needed) List total cost on bottom line.

Quantity	Item	Supplier	Price
		TOTAL	

Type additional team member's names (if applicable)

Building Administrator signature:

PRINT THE ENTIRE APPLICATION FORM, HAVE YOUR ADMINISTRATOR SIGN, THEN SCAN THE ENTIRE APPLICATION FORM AS A PDF DOCUMENT AND EMAIL TO LOIS STOLL AT lcedfd@gmail.com
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