

 **Carlynton Education Foundation**

**Teacher Enrichment Grant Application**

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant’s Name: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Email: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Position: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** School: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** School Phone: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Grade Level (s): **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** # Students Who Will Benefit \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Budget Amount Requested: $**\_\_\_\_\_\_\_\_(max $500)** Date Funds Required: **\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_**

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| **Project Overview: Please tell us about your request** |
| **What is the expected Educational Benefit?** |
| **Detailed Budget Explanation:** |

By receiving the grant I understand that the Carlynton Education Foundation may share this proposal, and the results of this project, with other educators and the community.

Applicant Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_

Principal Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_

**Send completed applications with appropriate signatures to** **lisa.rowley@carlynton.k12.pa.us** **or mail completed forms to** Carlynton Education Foundation, c/o Lisa Rowley, 435 Kings Highway, Carnegie, PA 15106