

Trumbull Academic Challenge for Excellence (ACE) Foundation
Grant Application for Academic Teams/Groups

Project Title: _____

Academic Team/Group Name: _____

Advisor/Contact Person & School: _____

Phone: _____ E-Mail: _____

Total Funds Requested: _____

Project Description: (Please provide a short program description, an itemized budget, supporting documentation, and/or any other helpful information. You may include attachments.)

Describe the educational benefits gained through the expenditure of these funds:

What involvement have members of the academic team/group and their parents had (or promise to have) in helping the ACE Foundation raise funds?

For bus transportation-related request (please respond to Parts A, B, and C as appropriate):

(A) Is your group small enough (8 or fewer) that a free van potentially available from the Transportation Department will meet your need? _____ Yes _____ No. If yes, have you scheduled the use of a van for your trip? _____ Yes _____ No.

(B) If a bus is needed, can your trip be scheduled such that departure can be at or after 8:45 a.m. with return to school at or before 1:45 p.m.? _____ Yes _____ No. If yes, have you checked with the TPS Transportation Department to schedule a free bus for your trip? _____ Yes _____ No.

(C) If your group cannot use a van or your trip requires a bus but cannot be scheduled during the "free bus" timeframe and your trip must occur on this date, please describe your need here:

If technology related, what response has the academic team/group received from the Trumbull Technology Foundation?

What other sources currently exist to fund this project? Have other applications been filed or does the team/group plan to file?

What deadline, if any, exists for funding this request?

If grant is awarded, to whom should the check be payable and by when?

Payee name: _____

Address: _____

Phone: _____ Date needed: _____

Special Instructions (if any): _____

Please be advised that, by acceptance of these funds, you pledge that the money will be spent in the manner proposed above and any unused funds will be returned to the ACE Foundation if the project finishes under budget or is cancelled. Further, the academic team/group will supply to the ACE Foundation a report describing the outcome of the project, an accounting of the monies spent, and documentation verifying the expenditures.

Advisor's signature: _____ Date: _____

Project Approved by: _____ Date: _____