

CLAYSBURG EDUCATION FOUNDATION

Venture Grants for Teachers Application

Directions: Please review Venture Grant Guidelines before completing this application. They can

be found on the Internet under FOUNDATION GOALS.

You have three options for completing this form:

- 1. Write or type all of the information on this application.
- 2. Type all of the information on a separate sheet and staple it to this application.
- 3. Pull up the form on the Internet at www.claysburgeducationfoundation.org (under Foundation/Goals). Follow the instructions for filling out this application online. Print the completed form and mail it or email to the address below before the stated deadline.

APPLICANT(S)	PHONE AND EMAIL CONTACT
SCHOOL OR EDUCATIONAL GROUP	PROJECT TITLE
	\$
GRADE LEVEL/DEPARTMENT	BUDGET REQUEST

1. Write a one-paragraph summary of the project you would like to try at your school.

2. Tell why you think there is a special need for this project.

		, needed materials, resource personnel,
community involvement and you	ar tentative schedu	ne.
4. Approximately how many stud	dents will be affect	ed by this project? Explain how you arrived
at this number.		
5. Evaluation - How will you dete	ermine if your obje	ctives have been met? You will be required
to write a one-page evaluation a	it the conclusion of	f your project if it is funded.
6. Detail your budget request. In	clude specific infor	rmation such as the kinds of materials and
equipment needed, supply source	ces, etc. Be sure to	include all costs.
ITEM	SUPPLIER	COST
Applicant Signature		Date
Supervisor or Principal of Buildin	 ng Signature	Superintendent Signature (if applicable
Return this application by emaili	ng to: claysburged	ducationfoundation@gmail.com or mailing to
Claysburg Education Foundation	า	
Venture Grant		
595 Bedford Street		
Claysburg, PA 16625		