GRANTS FOR MEMBERS OF STONEHAM'S EDUCATIONAL COMMUNITY
APPLICATION FORM

Proposal # _____

1. Date_____

2. Title of Project _____

3. Project Applicant(s): _____

    Name_____

    Home Address & Tel. # **(Email Address)**_____

    Organization Affiliation _____

    Work Address & Tel. # **(Email Address)** _____

    Position/Affiliation _____
    (for teachers: dept./teaching area/grade level)

    Application Prepared By **(If different from above)**: _____

    Name_____

    Home Address & Tel. # **(Email Address)**_____

    Organization (**Check made out to**) _____

    Work Address & Tel. # **(Email Address)** _____

    Position/Affiliation _____
    (for teachers: dept./teaching area/grade level)

Attach another sheet for additional participants, giving all information requested above.

Signature(s) of the Project Applicant(s): _____

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For Grants Committee use only. Thank you!
(1 is lowest; 5 is highest)

1.	Does the outcome of the proposal support Foundation goals?	1 2 3 4 5
2.	Is the overall intent of the project clearly defined?	1 2 3 4 5
3.	Is the target audience clearly defined?	1 2 3 4 5
4.	Is the project reasonable given timelines and proposed budget?	1 2 3 4 5
5.	How innovative is the project?	1 2 3 4 5
6.	Does the project involve creative learning techniques?	1 2 3 4 5
7.	Is the size of the target audience appropriate to the project concept?	1 2 3 4 5
8.	Is there a demonstrated need for this project?	1 2 3 4 5

Total Points   _____

Is this a re-submission?   Y   N   Date Awarded _____   Amount Awarded _____

4. Summarize the proposed project. (Describe who is the target audience; what will happen, when and where it will occur; how it will be executed.)

5. Describe the planning done for this project in terms of process, and who or what organizations/ individuals was/were involved as partners or advisors.

6. What are the goals/anticipated outcome of the project? How will you share the results with the community. (Include promotion, expected results and plans for evaluation.)

7. List major qualifications of key artists, presenters, or cultural organizations involved in this project. (Please attach resumes and two references and/or reviews of their work.)

8. Budget Info:

Expenses		Income	
		Total Project Cost	$ _____
Salaries/Fees	$ _____	Admission/Registration	$ _____
Supplies	$ _____	Clubs/Organizations	$ _____
Space Rental	$ _____	Amount Requested from SBCEF	$ _____
Other (please specify)	$ _____	Other (please specify)	$ _____
Total Project Expenses	$ _____	Total Project Revenue	$ _____

8. Are you pursuing any additional funding sources? Please list.

9. Has this grant application been previously submitted? If so, when?