

# Grant Application Form

Please complete this form in legible handwriting. Or you may highlight the form, copy it, and paste it into a word-processing program for electronic completion.

Each applicant MUST SUBMIT TWO (2) COPIES OF THE COMPLETED APPLICATION FORM, together with any supporting materials, to:

Bolton Community Education Foundation  
c/o Pam Cropley  
27 Stonehedge Lane  
Bolton, CT 06043

Please note that the determination to fund a program and the amount of such funding, if any, rests exclusively with the BCEF. Not all grant applications, regardless of merit, can be funded.

If you would like more information on applying for a grant, please contact the Bolton Community Education Foundation at [info@boltonedfoundation.org](mailto:info@boltonedfoundation.org).

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Application #: \_\_\_\_\_ (For internal use only)

## Applicant Information:

1. Applicant's Name: \_\_\_\_\_

2. Home Phone: \_\_\_\_\_

3. Professional Affiliation: \_\_\_\_\_

4. Program Title and Subject Area: \_\_\_\_\_

5. Proposed Program Location: \_\_\_\_\_

6. Date of Application: \_\_\_\_\_

By signing below, the applicant hereby (a) agrees to secure all required approvals from the town or Board of Education which relate to the completion of the program; (b) agrees to submit a post-project evaluation to the Bolton Community Education Foundation; (c) grants the Bolton Community Education Foundation the right to use this application and the results of this project, if funded, for public information and to help other foundations; and (d) understands that the Bolton Community Education Foundation is solely a funding conduit and takes no liability or other responsibility for the program or its execution.

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Applicant's Signature

*Please complete all the referenced information in order to facilitate the evaluation of the proposal.*

Program Information:

7. Overview: Briefly describe your program.

8. Objectives: State specifically what your program will accomplish.

9. Plan of Action: Describe the curriculum as it will progress.

10. Timeline: Provide a timeline for the program.

11. Who are your target participants and approximately how many students are you planning for?

12. Rationale: Why do you think there is a specific need for this program?

13. Given the stated criteria, explain why you think your program should be selected for funding.

14. Evaluation: Describe your plans for evaluating the program. *(Evaluation methods can be as simple as facilitator observation of participant attitude and enjoyment, to more objective results or a measurement of skills attained as a result of the program, surveys of attendees' perceptions of the program or a specific performance or exhibit.)*

Funding Information:

15. Amount of Grant Request:

16. Total Estimated Cost of Project:

17. Budget: Please provide a budget or other itemized details of the cost of the project and all the sources which you intend to use to meet these costs. These costs may include a facilitator stipend, materials, supplies, refreshments, etc. Please indicate whether you plan to charge participants to attend this program, and whether participants must supply tools or materials to participate.

18. Are other funds available to pay for this project? *(If other funds are available in addition to this grant, please describe what efforts you have made to obtain such funds.)*

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