

SHELTER ISLAND EDUCATIONAL FOUNDATION, INC.

Institutional Grant Application

Date: _____

Name of Institution: _____

Name of Applicant: _____

Address of Applicant: _____

Telephone Number of Applicant: _____

E-mail Address: _____

Amount of Grant Request: _____

I. PROJECT DESCRIPTION — Provide a brief project summary. If this grant is to be used as part of a larger project, please give a description of the larger project and provide supporting documentation.

II. PROJECT OBJECTIVES — List the specific objectives of the project and how they meet the criteria of the Foundation’s mission statement.

III. PROJECT PLANS AND TIMETABLE — List specific activities you plan to carry out to achieve project objectives.

IV. PROJECT EVALUATION

A. How will project be documented?

B. How and by whom will project be evaluated?

C. To whom will the results be disseminated?

D. Will the project be continued after the grant ends? How will it be funded?

V. PROJECT FUNDING — Has this grant proposal been submitted to any other source for funding? If so when, and to whom? What is the status?

VI. PREVIOUS PROJECTS — Has the applicant previously received funding from the Shelter Island Educational Foundation? If so when, and for what project?

VII. OTHER INFORMATION — Please provide the following additional information:

A. Project budget

B. Copy of Internal Revenue Service exemption letter (Shelter Island School exempt)

C. Most recent copy of Form 990 (Shelter Island School exempt)

Grant recipients must provide a brief written description and appraisal of their project at its completion. It is anticipated that the recipient will share this information at the SIEF Fall Annual Meeting.

Applicant's signature _____ Date _____

Institutional Approval (Authorized Officer)

Name _____ Signature _____ Date _____

CHECK LIST FOR S.I.E.F. INSTITUTIONAL GRANT

It is important that your application be complete in order to receive consideration by the Grants Review Committee. Please use this check list to ensure that all required information is included.

General Information:

- _____ Date of application
- _____ Name of institution
- _____ Name of applicant
- _____ Address of applicant
- _____ E-mail address
- _____ Telephone number of applicant
- _____ Total amount of grant request

Program Description:

- _____ Description of proposed project
- _____ Relationship to and description of a larger project (if applicable)

Project Objectives:

- _____ Specific objectives of project
- _____ Benefits of program to S.I. students/community
- _____ Relationship of program to SIEF's goals

Project Plans and Timetable:

- _____ List of specific activities

Previous Funding:

- _____ When
- _____ Description of previous project

Other Information:

- _____ Project budget
- _____ Copy of IRS exemption letter
- _____ Most recent Form 990

Signatures and Dates:

- _____ Grant applicant
- _____ Institution's authorized officer

Project Evaluation:

- _____ How project will be documented
- _____ By whom will project be evaluated?
- _____ To whom will results be disseminated?
- _____ Plans for project after grant ends including further funding

Other Sources of Funding:

- _____ Name of source
- _____ Date of application
- _____ Status of application