

ROTARY CUB OF VICTORVILLE

Teachers' Mini-Grant Fund

Application Form

DUE DATE: October 17th, 2023 5 p.m. no exceptions

Applicant' Name: _____ **e-mail:** _____

Home Address: _____ **City:** _____ **Zip:** _____

Home Phone: _____ **School Phone:** _____

School District: _____ **School:** _____

Subject of Class: _____ **Grade(s):** _____

Students in Class: _____ **# Students in Project:** _____

Project Title: _____ **Amount of Grant (Max \$300):** \$ _____

Please answer the following questions:

The committee's decision is based on the information you provide.

Please use additional sheets if required.

1. What do you propose to do?

2. How will you do it?

3. How will it enrich the day-to-day experience of students?

4. How is it different from other activities?
5. How is it innovative?
6. How do you propose to use the monies requested? <i>(Please include specific budget information regarding costs and necessary resources)</i> How will you fund the difference?
7. Are the monies available from any other source? Yes No (If "Yes", please explain)
8. Are materials available anywhere in your school? Yes No (If "Yes", please explain)
9. How long will this funding request maintain the project? _1 Time _1 Semester _1 School Year Multi-_____ years Other_____ Explain _____

NOTE: By signing this application, you give permission for the Rotary Club of Victorville to visit your school in January or February 2024 to take pictures of your students using the material or film your project that was supported by the Mini-Grant.

Applicant's Signature: _____ Date: _____

Principal's Signature: _____ Date: _____

Forward your completed Application to:

**Rotary Club of Victorville or send to vvrotary@live.com
Teacher Mini-Grants
P.O. Box 734
Victorville, CA 92393
Phone: (760) 985-5686 Bill Edwards**