



# Lake Orion Education Foundation

P.O. Box 932, Lake Orion, MI 48362

## GRANT APPLICATION

CHECK ONE:  FALL  SPRING SCHOOL YEAR: \_\_\_\_\_

Please complete all sections of the grant application and attach all relevant supporting documentation. A copy of the application should be submitted electronically to Drew Towlerton at [andrew.towlerton@lok12.org](mailto:andrew.towlerton@lok12.org) or via inter-school mail to Drew Towlerton.

Applicant Name	School
Project Director (If other than applicant)	Organization Name
Project Title	School Address
This Request is For <input type="checkbox"/> Academic <input type="checkbox"/> Athletic <input type="checkbox"/> Club Activity	City <span style="float: right;">Zip Code</span>
Project Location	School Phone Number
Dates of Project From _____ To _____	Applicant's Evening Phone Number
Amount Requested	Applicant's Email Address

Detailed Description of Project
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Project Objectives
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How many individuals will benefit from this project? Students (include grade level) _____ Staff _____ Volunteers _____ Other (describe) _____																													
Describe your population (I.E., Gifted and Talented, At-Risk, etc.)  																													
How will you determine whether your objectives have been achieved and whether your project is successful?  																													
Project Budget: Your budget MUST balance. Total project expenses must equal project revenues. Food and field trips will not be funded by the foundation.																													
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Expenses</th> <th style="width: 20px;"></th> </tr> </thead> <tbody> <tr><td>Personnel</td><td>_____</td></tr> <tr><td>Professional Development</td><td>_____</td></tr> <tr><td>Materials/Supplies</td><td>_____</td></tr> <tr><td>Rentals (equip., materials, etc.)</td><td>_____</td></tr> <tr><td>Other (specify)</td><td>_____</td></tr> <tr><td><b>TOTAL</b></td><td>_____</td></tr> </tbody> </table>	Expenses		Personnel	_____	Professional Development	_____	Materials/Supplies	_____	Rentals (equip., materials, etc.)	_____	Other (specify)	_____	<b>TOTAL</b>	_____	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Revenue</th> <th style="width: 20px;"></th> </tr> </thead> <tbody> <tr><td>School Support</td><td>_____</td></tr> <tr><td>Organization (PTO/PTA) support</td><td>_____</td></tr> <tr><td>Corporate Support</td><td>_____</td></tr> <tr><td>Lake Orion Education Foundation</td><td>_____</td></tr> <tr><td>Other (specify)</td><td>_____</td></tr> <tr><td><b>TOTAL</b></td><td>_____</td></tr> </tbody> </table>	Revenue		School Support	_____	Organization (PTO/PTA) support	_____	Corporate Support	_____	Lake Orion Education Foundation	_____	Other (specify)	_____	<b>TOTAL</b>	_____
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Have you/your school or organization received funding for this project in a previous year? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what amount? _____																													
If awarded, how should this check be made payable?																													

*A Grant Summary, including an accounting of all funds and receipts, must be completed and submitted within 30 days of the conclusion of the project. The applicant agrees that the support funds will be administered by the applicant or organization and used as requested. Any funds received under this grant shall not be used to replace funds normally budgeted for this activity and must be used solely for the stated purpose. Any materials, equipment, etc. awarded by the grant will be the property of Lake Orion Community Schools.*

*If the grant is awarded, the applicant agrees to recognize the Lake Orion Education Foundation on promotional and other materials related to the program/event. Award checks are issued in January and August. If monies are needed earlier than January/August please explain:*

*The applicant has read, understands, and agrees to the guidelines stated above.*

*Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_*

*The filing of the application by the undersigned official indicates support for this application.*

*Building Principal: \_\_\_\_\_ Date: \_\_\_\_\_*