

| GRAI   | <b>GRANT APPLICATION</b> |  |  |  |
|--|--------------------------|--|--|--|
| DATE:  |                          |  |  |  |
| PROJECT TITLE: ANTICIPATED START & END DATES OF PROJECT: TOTAL AMOUNT REQUESTED (USD): |                          |  |  |  |
| APLICANT   |                          |  |  |  |
| NAME:  | ADDRESS                  |  |  |  |
| GRADE:   | SCHOOL:                  |  |  |  |
| TELEPHONE:   | E-MAIL:                  |  |  |  |
| OTHER APPLICANTS   |                          |  |  |  |
| NAME:  | ADDRESS                  |  |  |  |
| GRADE:   | SCHOOL:                  |  |  |  |
| TELEPHONE:   | E-MAIL:                  |  |  |  |
| Relation with EERC   |                          |  |  |  |
| ADVISOR/PROFESSOR  |                          |  |  |  |
| NAME:  |                          |  |  |  |
| ORGANIZATION/ SCHOOL:  | POSITION:                |  |  |  |

## **PROJECT DESCRIPTION**

| Date:        |       |
|--------------|-------|
| Applicant(s) | name: |

- I. Goals of the project:
- II. **Project description:** why you think it is important/what you want to achieve with the project; who and how many will be involved in the project and where; what are your hoped for outcomes or benefit(s) of the project. (can use a separate page)

- III. **EERC mission and values promotion:** How can your project further the mission or visibility of EERC?
- IV. **TIMELINE:** Please list each activity and approximate dates/length of time each activity will take; please make clear start and completion dates of the project.

### V. OUTCOMES/EVALUATION

Describe how you will measure the success/impact of your project. (I.e. Participant survey, video interviews, attendance etc.)

#### VI. SUSTAINABILITY

Will this project continue after the completion date? What are ways to share the results of the project with others ( students, communities, organizations) that might benefit or support

#### VII. BUDGET/EXPENSES

Please be as specific with the prices of any equipment, materials to be purchased or related costs. (may not need all categories)

| Expense (\$)     | Purpose | Price | Total |
|------------------|---------|-------|-------|
|                  |         |       |       |
| Materials        |         |       |       |
| Guests           |         |       |       |
| Other costs*     |         |       |       |
| Total            |         |       |       |
| Amount requested |         |       |       |

\*If consultant fee, please include brief biographical/professional information Non-EERC funding source and amount, if any:

Is there any other additional information you would like to share?

# EERC USE ONLY

Approved: YES AMOUNT

NO REASON