Otsego Education Foundation P.O. Box 572 Gaylord, MI 49734

APPLICATION FOR MINI-GRANT FUNDS

Applicant	Date	
Position		
School		
Project Title		
Targeted academic area		
Targeted grade level	_	
Number of students involved	_	
Number of staff and / or volunteers involved		
Total amount of funds requested	_	
Recommendation by building principal:		
Signature		

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Applicant Project Title		
2.	Project Goals: Describe the skills you expect your students to develop and / or the knowledge you expect them to acquire as a result of this project.	
3.	Project Costs: Explain and itemize the estimated cost of implementing your project. Please make note of any other funding resources for which you have or intend to apply.	
4.	Project Creativity: Describe the innovative and/or creative aspects of this project.	