

Date Rec'd \_\_\_\_\_  
Grant # \_\_\_\_\_

Foundation of Monroe County Community Schools

**Grant Application**  
**Fitness, Health and Wellness Challenge Grants**  
**2007-2008**

**Part I. General Information**

Title of Project: \_\_\_\_\_

Project Start Date: \_\_\_\_\_ Project End Date: \_\_\_\_\_

Amount Requested: \_\_\_\_\_ # Students Impacted: \_\_\_\_\_

Project Director: \_\_\_\_\_ Position: \_\_\_\_\_

School: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Phone #/Extension: \_\_\_\_\_

Names and Positions of other Persons Involved: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Population to Benefit: \_\_\_\_\_

For record keeping purposes, list previous FMCCS grants received by the Project Director:

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*Revised 7/07*

**Please attach typed responses to the following on a separate piece of paper.**

**Part II. Project Description**

*Describe the project for which you are requesting grant funds. Detail the population to benefit and provide a timeline for your project.*

**Part III. Project Goals**

*Describe the goals and anticipated outcomes for your proposed project.*

**Part IV. Proposed Project Evaluation**

*Describe how you intend to measure, gauge or otherwise determine how successful the program activities were in meeting the project goals described in Part III.*

**Part V. Budget**

*Include an itemized budget for this project including vendor identification. Provide a listing of additional funding provided for this project from other sources.*

**Part VI. Publicity**

*Describe your plans to publicize the grant within your school community and to share grant results with your faculty.*

**Part VII. Applicant's Signature**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Part VIII. Principal's Signature for school projects OR Superintendent's Signature for district projects**

*I have reviewed this proposal and support this project.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Part IX. Sponsor's Signature for Grant Request submitted by a student(s).**

*I will serve as sponsor for this project and will be responsible for insuring that grant funds are properly used. I will also insure compliance with all Foundation policies and procedures.*

Signature \_\_\_\_\_ Date \_\_\_\_\_