Mini-Grant Application Form

Applicant(s):
School(s):
Lead Contact:
Phone Number () ext Email Area of Focus:
Meeting Frequency: Times: Locations:
1) Describe the goals of your project/study.
2) Why is this project important (to your group and your school(s))?
3) Briefly describe what interim and/or annual student data will drive your study (collaboratively assessed writing samples, attendance and behavior data, demographics, etc?)

Please list desired resource the number of grant appro-		-	oject. (Depend
Project Description	(A) Quantity moded	(P) Cost now Itom	(C) Subtate
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