WOODSIDE HIGH SCHOOL FOUNDATION
Grant Funding Application ~ Fall 2008

Please complete the following application and return it to the Woodside High School Foundation Mailbox in the Staff Work Room by 4:00 p.m. on Wednesday, October 15, 2008. If you have questions, please contact Michelle Stanley or Nancy Arbuckle (michelle.stanley@medivation.com or crockerbuckle@mindspring.com). Please note that this will be the WHSF's only project-grant funding cycle this year.

BACKGROUND INFORMATION ***(Please print)***

Applicant's Last name First name Date of application

Department Campus phone/extension email address

_____

Position, title, subjects taught or number of students served

_____

REQUEST FOR FUNDS

Please provide the following information to help us understand the purpose and scope of your request for funds.

1. A brief project description:

2. The goals and objectives you expect to accomplish: (Please include information on how student performance and/or the school environment will be enhanced by this expenditure.)

3. Project timeline:

4. Breakdown of estimated costs and total of funds needed:

5. Approximate number of students and/or staff to be served by this grant: Students _____ Staff _____

6. Has this project been submitted to the WHSF before for funding? Yes ___ No___

7. Are there any alternative/outside sources of funds available to fund all or part of this request? Yes ___ No ___

8. Do you have a maintenance plan? Are there funds to back up this plan?

NOTIFICATION

Applicant and WHS Principal shall be notified within one week to confirm that WHSF has received this application. Final funding decisions will be made by the WHSF. WHSF reserves the right to fund grants subject to specific conditions. In accepting a grant, a grantee must agree to provide access and documentation to the WHSF for the purpose of follow-up and evaluation. Applicant or Department Heads will be required to report results and status of equipment to WHSF after one year.

SIGNED BY: Applicant _____ Ext#_____ Date_____

Dept. Head _____ Ext# _____ Date_____