

**LOUDOUN SOIL & WATER CONSERVATION DISTRICT
2018-19 MINI-GRANT PROGRAM APPLICATION FORM**

This form is posted on the District's website: Loudounsoilandwater.org
Please attach more sheets if you need to provide more information.

School _____

Teacher(s): _____

Contact Person: _____

Address _____

Email _____ **Phone** _____ **Fax** _____

Project Title _____

Amount Requested: \$ _____

Audience: Who will participate? _____

Number of students: _____

Project Description (clearly state goals and objectives in 100 words or less)

Project Activities: Describe how, where and what activities you will do with your students.

Educational Objectives: What do you want your students to learn? If applicable, list Standards of Learning (SOL#).

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Partners: Who is cooperating with the project (names, affiliation and role)?

Expected Results: What will happen as a result of the project?

Publicity: Explain how project results will be shared with other students &/or schools.

Time Line: List important activity starting and ending dates.

Continuing Education: Describe plans for continuing project activities beyond the grant period.

Budget: Please itemize your anticipated costs in the table below:

Expenditure Description	Amount Requested from LSWCD	Other Sources of Contributions:	Source
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
TOTALS:	\$	\$	