

**w.h.a.t. Grant Application**

**Applicant and Project Information**

*Section 1 – General Information*

**Project Title** \_\_\_\_\_

**Project Leader(s)** \_\_\_\_\_

**Department/Curriculum Area(s)** \_\_\_\_\_

**School** \_\_\_\_\_ **Telephone** \_\_\_\_\_

**Email** \_\_\_\_\_

**Schools and grade levels participating in this project** \_\_\_\_\_

**Proposed beginning and ending dates of project** \_\_\_\_\_

**If this is a collaborative project, please identify the participants and the nature of the collaboration.**

\_\_\_\_\_  
\_\_\_\_\_

**Number of students who will benefit from this project** \_\_\_\_\_

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### *Section 2 – Project Description*

**Please attach a summary of the proposed project to this application form, including the following information:**

- **Project Goal(s)**
- **Educational benefits (skills, concepts introduced, taught or reinforced)**
- **Curriculum links (identify how this project will interface with the mission of the school, the Hampden Wilbraham Regional School District or the Commonwealth's curriculum framework)**
- **Project activities – Describe the activities/procedures that will be implemented to meet the project goals. Please include all materials that will be used to support the project implementation in the description. Identify any outside consulting, travel, or unique accommodations that are required.**
- **Evaluation/Assessment Strategies**

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## *Section 3 – Proposed Budget*

**State the budget items and estimated costs. Please attach any supporting documentation.**

**Consumable supplies** \_\_\_\_\_

**Materials/equipment** \_\_\_\_\_

**Rental equipment** \_\_\_\_\_

**Personnel** \_\_\_\_\_

**Travel** \_\_\_\_\_

**Fees/Admissions** \_\_\_\_\_

**Total** \_\_\_\_\_

**Are you applying to additional or alternative funding sources? Please explain.**

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### *Section 4 – Applicant(s) Requirements*

**All applicants are responsible for obtaining the signed approval of the School Principal as acknowledgement and approval of the applicant's proposal.**

_____ <b>Name of Principal</b>	_____ <b>School</b>
_____ <b>Signature</b>	_____ <b>Date</b>

**I understand that should this grant application be funded by w.h.a.t., I am obligated to submit a detailed summary of the project with any available supporting documentation, and return any unused supplies or materials to w.h.a.t. at the project's completion.**

_____ <b>Name of Applicant(s)</b>	_____ <b>Signature of Applicant(s)</b>
_____ <b>Position</b>	_____ <b>Date</b>

Please feel free to include any additional information concerning the project that you think may be useful for the application review.

If you have questions concerning the grant application process, please feel free to contact Lynne Quintin, at;  
**w.h.a.t.**, P.O. Box 477, Wilbraham, MA 01095-0477  
telephone 596-2698  
email [whatsup@whatinc.org](mailto:whatsup@whatinc.org)