

LEARNING GRANTS BY SRP

2012–13 Application Form Grades K–12

Application and Proposal (must be postmarked by midnight March 31, 2012)

Name of School: _____

School Address: _____ City: _____ ZIP: _____

School District: _____

Amount of Request: _____

Name of Person Responsible for Program: Mr. Mrs. Ms. _____

Affiliation with School: _____

Home Phone: (_____) _____ School Phone: (_____) _____

Primary Email: _____ Secondary Email: _____

On separate double-spaced, typed sheets, please outline your proposal under all of the following headings:

- | | |
|------------------------------------|-----------------------|
| 1. Description | 5. Innovation |
| 2. Statement of Need | 6. Budget |
| 3. Project Activities and Timeline | 7. Evaluation Process |
| 4. Student Impact | |

Learning Grants by SRP Program Affidavit

This certifies that all the information contained in this application for Learning Grants by SRP is true and factual to the best of my knowledge.

Principal's/School Official's Name: _____

Principal's/School Official's Signature: _____ Date: _____

Name of School: _____

A signed affidavit and proposal **MUST be postmarked by midnight March 31, 2012.**

Please return with proposal to:

Alison Smith
Learning Grants by SRP
Community Outreach PAB332
P.O. Box 52025
Phoenix, AZ 85072-2025



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