



Classroom Enhancement Micro Grant **APPLICATION** 2020 – 2021

Name of Applicant:

Position:

What will you purchase?
Be specific:

Brief Description:

School/Department:

Principal/Admin:

Email Address:

Phone Number:

Total Project Cost:

Amount Requested:

Dates of Project:

Number of Students Impacted:

Signature of Applicant _____ Date _____

Signature of Principal/Admin. _____ Date _____

Deadline

Please send your completed application to grants@slefoundation.org

Upon approval, grant applicants will make purchases and MUST request reimbursement within **one month** of approval. Failure to do so will result in funds being reallocated. Grants have a \$100 limit.

Contact the Grant Committee if you have any questions. Email: grants@slefoundation.org