



**Durand Area Schools Educational Foundation  
Mini Grant Application, Adjusted Maximum \$300**

Name(s) of Applicants \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

Individual Employee Responsible for Grant \_\_\_\_\_

Contact Information for Notifications/Questions (phone, email or text) \_\_\_\_\_

Brief Description of Project or Activity \_\_\_\_\_

Cost of Project \_\_\_\_\_ Number of Students to Benefit \_\_\_\_\_

Source of other funds that may be needed to fulfill financial need \_\_\_\_\_

**Required Documents (4 copies):**

- Application
- Project Narrative
- Anticipated Outcomes
- Method for Measuring Outcomes
- Itemized Budget
- Project Timeline

\_\_\_ I agree to acknowledge funding from Durand Area Schools Educational Foundation in any correspondence about the activity that goes to parents and the media

\_\_\_ I agree to notify Jan Harper (janharper@charter.net) with the date, time & location of the event (either included in application timeline or as submitted when details are finalized)

Submit 4 copies of application and supporting documents via inter-school mail to Administration Building, c/o Durand Educational Foundation or mail to Durand Educational Foundation, P.O. Box 124, Durand, MI 48428. Verbal presentations to the Foundation Board are acceptable; however all documents must accompany presentation. Email janharper@charter.net for meeting date.

Applications will be accepted at any time; however the grant selection process may take up to 8 weeks.

Signature of Responsible Party \_\_\_\_\_ Date \_\_\_\_\_

Signature of Principal/Supervisor \_\_\_\_\_ Date \_\_\_\_\_

Please make check payable to: \_\_\_\_\_

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**FOUNDATION USE: FUNDED YES NO**

**DATE \_\_\_\_\_ COMMENTS \_\_\_\_\_**