

**Friends of Arlington's Great Meadows
Education Mini Grant Program Application**

Applicant(s) _____

Sponsor(s) if applicant is a minor _____

School or Organization _____ **Grade level** _____

Address _____

Phone _____ **E-mail** _____

Project Title _____

Total amount requested \$ _____

Number of students involved in project _____

Project Description:

(Describe specifically what will take place, when, and where)

Objectives for Students:

(What are the expected changes in students’ attitudes, behaviors, and/or knowledge as a result of this project, and how will you evaluate if those results have been achieved?)

Budget:

(As specifically as possible, detail how the requested funds would be spent. Documentation of actual expenses should be included with the final report.)

| | |
|-------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |

Anticipated start date _____
Anticipated completion date _____
Anticipated date of final report _____

Applicant’s Signature _____ **Date** _____

Sponsor’s Signature _____ **Date** _____

Submit to: Sandra Ruggiero
48 Sanderson Road
Lexington, MA 02420
Sandra.ruggiero@comcast.net