



St. Croix Valley Community Foundation Music Education Grant Program

Application Form

Name of applicant school		District (if any)
Address		City, State, Zip
Name of applicant		Title
Phone	Fax	Email address
Project title		Start & end dates
Number of students who will benefit from this project	Total project cost	Amount requested

Project summary Please place two or three sentences summarizing the project; text must fit this space:

Narrative Please attach no more than two single-spaced pages of narrative following this outline:

- The need, problem or opportunity this project will address.
- Project description including the objectives and activities to be accomplished.
- How the project will contribute to music education in the St. Croix Valley.

Budget Detail Please list items separately and show how this amount was determined. Add an additional sheet of paper if more space is needed.

<u>Item</u>	<u>Detailed Description</u> – How amount was determined (e.g. artist costs per day, number of instruments)	<u>Cost</u>
Total Cost		

Other Funding Sources Please describe the source of additional funding required.

<u>Funding Source</u>	<u>Amount</u>	<u>Received?</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
Total Requested		_____

Signature of the applicant school certifies that if awarded a grant, the organization will:

- Carry out the activities and expend grant funds as described in the proposal, to the best of their ability.
- Submit significant changes in the scope or budget of the project to the foundation for approval.
- Notify the foundation of performances, displays, celebrations or other events related to this project
- Complete a written report within 30 days of the completion of the project.
- Acknowledge the foundation's role in supporting the organization in communications with students, parents, school districts and their boards and the public.

Signatures by applicant school

Applicant (signature and date): _____

Printed name and title: _____

Principal/Headmaster (signature and date): _____

Printed name and title: _____

Phone: _____ **Email:** _____

Applicants which are not public schools should submit a copy of the organization's 501(c)(3) letter from the IRS. If an applicant does not have 501(c)(3) status, the grant must be administered by a fiscal agent who should sign below. A copy of the fiscal agent's 501(c)(3) letter must be included with the proposal.

Fiscal Agent Organization (signature and date): _____

Printed name and title: _____

Phone: _____ **Email:** _____

Proposal checklist

- Application form including budget and signed by the school's Principal or Headmaster (and fiscal agent if necessary). **Applications without these signatures will not be considered.**
- 1-2 page proposal narrative
- 501(c)(3) tax determination letter (if you are a 501(c)(3) organization)
- Prepare and submit **a total of eight** sets (including the original and seven copies) of this form, the narrative and any attachments to:

St. Croix Valley Community Foundation
516 Second St., Suite 214
PO Box 39
Hudson, WI 54016-0039

Due by
5:00 p.m., Tuesday October 6, 2008

Proposals sent by fax or email will not be accepted