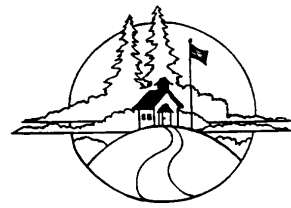


VERNONIA SCHOOL DISTRICT



Grant Application Approval Form

District Grant Applicant: _____

Date: _____

Grant Information:

Title: _____	Fiscal year of grant: _____	Amount: _____
Date Application Due: _____	Grant Start date: _____	Grant End Date: _____
Grantor Address: _____		
Grantor Contact information: Name: _____		Phone: _____
Funds request information: How will the district secure grant funds? (i.e. request reimbursement, request funds up front, funds will be sent without request form, etc.) _____ _____ _____		
Brief Description of Proposed Activities: (attach additional description if necessary) _____ _____ _____		

District Commitment:

- Staff Time: _____
- Matching Funds (funds required of district): \$ _____
- Matching In Kind Materials (materials required of district): _____
- Other: _____

Budget Total (includes district portion if applicable): \$ _____

Comments: _____

Administrator Review Date: _____

Approved Not Approved

Administrator Signature

Business Office Review Date: _____

Approved Not Approved

Signature

Superintendent Review Date: _____

Approved Not Approved

Superintendent Signature

(INSTRUCTIONS ON REVERSE SIDE)

GRANT APPLICATION INSTRUCTIONS:

1. Fill out form on reverse side
2. Submit form along with grant information paperwork and grant budget to your administrator for approval
3. Administrator submits form and information paperwork to district office
4. Business office reviews application for approval
5. Superintendent reviews application for approval
6. Copy of Application Approval Form is returned to grant requestor
7. Requestor submits grant application to grantor
8. Requestor informs business office, administrator, and superintendent if the grant has been approved or denied.