

NDCCA GRANT APPLICATION

Date Received: _____

INSTRUCTIONS: Applications must be typewritten or may be reproduced in word processing to simulate this form. No handwritten applications! If needed or where requested, you may attach up to one additional page.

DATE:

GRANT TITLE:

CONTACT PERSON:

TELEPHONE #:

EMAIL:

SCHOOL:

NUMBER OF CHEERLEADERS ON TEAM/S:

AMOUNT REQUESTED: \$ _____ representing _____% of the total cost of request

1. Summarize your request.
2. Explain how this grant will assist you, as a coach, meeting the needs of your team
3. How will you evaluate the outcome of item(s) purchased or grant requested funds
4. Summarize your budget. Identify the item, quantity, and unit price for each part of your budget and total project cost.
5. If the grant request amount is reduced, would it be accepted? ____Yes ____No
6. Is there a deadline beyond which funds would not be helpful? ____Yes ____No
If yes, what is the deadline?
7. Have you applied for any other source of funds, or do you expect to receive other Funding? ____Yes ____No
If yes, list and explain the status of funds that may be or are expected to be available

APPLICANT'S SIGNATURE _____ Date: _____

PRINCIPAL/ADMIN. SIGNATURE _____ Date _____

SUBMIT COMPLETED APPLICATION TO:

Billie Ann Caya, NDCCA Awards Chair

172 Boise Ave Apt 1

Bismarck, ND 58504

(applications are NOT accepted via email or fax)