



GRANT #

(KEF USE ONLY)

# GRANTS TO TEACHERS COVER FORM

SUBMISSION DATE:

AMOUNT REQUESTED: \$

ALL SHIPPING COSTS MUST BE INCLUDED IN TOTAL OR APPLICATION WILL BE DENIED

APPLICANT(S) NAME:

SCHOOL:

PROJECT TITLE:

The anonymity of the grant application is important, please insure that applicant(s) name(s) only appear on this Cover Form. Applications listing names anywhere else will be denied.

Applications which do not include shipping, handling, and postage will be denied.

Awarded grant funds may only be used for awarded grant.

ELECTRONIC SIGNATURE OF LEAD APPLICANT:



**KINGFISHER EDUCATIONAL FOUNDATION**  
INVEST • EDUCATE • SUCCEED

**GRANT #**



(KEF USE ONLY)

## GRANTS TO TEACHERS APPLICATION

SUBMISSION DATE:

SCHOOL:

GRADE:

PROJECT TITLE:

AMOUNT REQUESTED: \$

NUMBER OF STUDENTS BENEFITING:

ALL SHIPPING COSTS MUST BE INCLUDED IN TOTAL OR APPLICATION WILL BE DENIED

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DESCRIBE PROJECT/ITEM TO BE PURCHASED:

WHAT LEARNING/SCHOOL OBJECTIVES DOES THIS ADDRESS (WHO BENEFITS, HOW & FOR HOW LONG):

