



TCS D  
FOUNDATION

## GRANT APPLICATION FORM

This Grant Application Form can be downloaded to your computer, completed and printed.

**Date of Request:** \_\_\_\_\_

**Grade Levels and Number of Students to Benefit:** \_\_\_\_\_

**Description of Project/Item:** \_\_\_\_\_

**Primary Objective or Use of Project/Item:**

**What outcomes do you expect to accomplish and how will you measure them:**

**Funding Needed for Implementation:**  
Provided by TCS D Foundation

Provided by Other Sources

**If your project is not fully or partially funded by TCS D Foundation, do you anticipate completing the project, and, if so, how?**

**Time Schedule for Project/Item:** \_\_\_\_\_

**Detailed Budget (*attach page if necessary*):**

**Project Applicant:**

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

School/Organization \_\_\_\_\_

Affiliation \_\_\_\_\_

**Additional Comments:** \_\_\_\_\_

Please mail completed form and any supporting documents to:

R. Carolyn Lange  
PO Box 726, Trumansburg, NY 14886  
[rlange3@twcny.rr.com](mailto:rlange3@twcny.rr.com)

**Deadlines** for grant requests: November 30 - Fall Grants and May 31 - Spring Grants.