COVER SHEET

GRANT APPLICATION

ALPHA CHI / DELTA KAPPA GAMMA SOCIETY INTERNATIONAL PATSY'S LEGACY PROJECT GRANTS 2023

| Name: | | |
|--|---------------------------------|--------|
| Campus / School District: | | |
| Department / Grade Level: | | |
| Contact Information / Phone Nu | mber(s) / E-mail Address (e | es): |
| Project Name: | | |
| ************************************** | | |
| Signature of Principal: | | |
| ********* | ******** | ****** |
| For Use by Alpha Chi: | | |
| Funded: | Date Received : _ | |
| Endorsed but not funded: | | |
| | | |

All applications should be submitted by August 31, 2023. Recipients will be notified by September 30, 2023.

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| Project Name: | |
|--|---|
| Do NOT use the name of your campus in the application. Only department name. | y the Cover Page should include the campus name o |
| Project Cost: | |
| Amount Requested from PLPG: | (not to exceed \$500.00) |
| Itemize, if needed: Vendor(s) must be on the district's pictures, descriptions, etc. so that we may have a k | • • |
| If asking for a portion of the total cost, explain ho | ow the remaining amount will be funded: |
| Project Objectives: Briefly state what you expect to acco | omplish with the project |
| Project Description : Describe your project in fifty words | or less |
| Project Timeline: | |
| Project Evaluation: | |
| | |
| (Applicants awarded a PLPG will be asked to share informatio | n with Alpha Chi upon completion of the project. |

By signing this application, applicants who are awarded a grant give their permission for Alpha Chi to publish their names/grant names on the Alpha Chi website and in the local papers.)

Completed applications should be submitted to:
Burnet Community / Sheralyn Nobles / sheralynnobles@yahoo.com;
Llano Community / Joyce Craven / Icraven1@verizon.net

Marble Falls Community / Susan Nye / snye1953@gmail.com