COVER SHEET

GRANT APPLICATION

ALPHA CHI / DELTA KAPPA GAMMA SOCIETY INTERNATIONAL PATSY'S LEGACY PROJECT GRANTS 2024

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

All applications should be submitted by August 31, 2024. Recipients will be notified by September 30, 2024.

GRANT APPLICATION ALPHA CHI / DELTA KAPPA GAMMA SOCIETY INTERNATIONAL <u>P</u>ATSY'S <u>L</u>EGACY <u>P</u>ROJECT <u>G</u>RANTS 2024

Project	Name: Do NOT
use the name of your campus in the application. Only the Cover Page should include the campus department name.	
Project Cost:	
Amount Requested from PLPG: (not to exceed \$5	500.00)
Itemize, if needed: Vendor(s) must be on the district's approved vendor list. You can attach vendor pictures, descriptions, etc. so that we may have a better "picture" of what you are asking for	
If asking for a portion of the total cost, explain how the remaining amount will be funded	l:
Project Objectives : Briefly state what you expect to accomplish with the project	
Project Description : Describe your project in fifty words or less	
Project Timeline:	
Project Evaluation:	
(Applicants awarded a DLDC will be asked to share information with Alpha Chi upon completion of the pr	oiost

(Applicants awarded a PLPG will be asked to share information 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 / Bunny Doubrava / bunny3551@yahoo.com
Marble Falls Community / Susan Nye / snye1953@gmail.com