7 YblfU'K]gWcbg]b'9`YWf]W7 ccdYfUf]j Y STEAM Grant

Application Information (Part 1 of 4)							
Applicant:				Date:			
School/Organization:			Grade T	aught:			
School/Organization Mailing Address:				City:			
State:	Zip Code:	Phone Number:					
Applicant's E-mail Address:							
School Principal/Organization Director:							
School Principal/Organization Director E-mail:							
Have you received a STEAM Grant from CWEC in the past? () Yes () No							
If yes, what did you receive the grant for?							
Project Overview (Part 2 of 4)							
Project Name:							
Amount Requested (not to exceed \$1,000):							
Curriculum Area:							
How many students will benefit from this project?							
Will items purchased be used for more than one year? () Yes () No							
Brief explanation of project's purpose:							
Project Dataile (Bart 2 of 4)							
Project Details (Part 3 of 4) How does this project relate to studies in science, technology, engineering, art, or math?							
What are the goals or objectives of the project?							
How will you implement this project? Include a general timeline if possible.							

Describe how this project is creative and innovative for your students:								
How will this project benefit your students?								
Budget & Funding (Part 4 of 4)								
Please include all items that are needed for this project.								
Quantity	Description	Unit Cost	Mandat	ory Item?	Total Cost			
Will you accept partial funding? () Yes () No								
If you receive partial funding, briefly explain how you will fund the rest of your project:								
Submission Checklist:								
This application has been reviewed and approved by the principal of this school or the organization director.				Yes	No			
Please read and sign the following statement: I certify that the information provided in this STEAM Grant application is correct to the best of my knowledge. Additionally, I authorize Central Wisconsin Electric Cooperative to release informtion announcing my grant (if awarded) for marketing and publicity purposes.								
Signature of Teacher:			Date:					
Signature of School Principal/Organization Director:			Date:					