

OSWEGO FOUNDATION FOR EDUCATIONAL EXCELLENCE  
GRANT PROPOSAL FORM  
(Due April 6, 2006)

DATE: \_\_\_\_\_

NAME(s): \_\_\_\_\_

\_\_\_\_\_

SCHOOL(s): \_\_\_\_\_

PHONE NUMBER(s): \_\_\_\_\_

PROPOSAL TITLE: \_\_\_\_\_

DESCRIPTION OF PROPOSAL: (Additional Pages may be added)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WHO WILL BENEFIT:

Grade Level (s): \_\_\_\_\_

Student Achievement Level: \_\_\_\_\_ Below Avg. \_\_\_\_\_ Average  
\_\_\_\_\_ Above Avg. \_\_\_\_\_ Special Ed

DOLLAR AMOUNT REQUESTED: \$ \_\_\_\_\_

BEGINNING DATE: \_\_\_\_\_ COMPLETION DATE: \_\_\_\_\_

SIGNATURE(s) of APPLICANT(s) \_\_\_\_\_

\_\_\_\_\_

PRINCIPAL: \_\_\_\_\_ (if applicable)

(Include a budget for your proposal on the form following this page.)