



# General Grant Request

This application is tailored to requests for funds from the Engelmann Foundation for projects, implementation, training and development, and other similar endeavors that utilize Direct Instruction (DI) programs.

The deadlines for submitting applications are 5:00pm PDT June 1st and December 1st (or the following Monday should the deadline fall on a Saturday or Sunday). It should be noted that while applications are accepted on an on-going basis, applications will be held for consideration until the next grant cycle deadline. For example, if you submit an application on January 25th, your application will be reviewed by the board following the June 1st deadline.

You may only submit one application per 12-month period. Please read and affirm your agreement to the Engelmann Foundation Grant Policies outlined at [www.engelmannfoundation.org/grants](http://www.engelmannfoundation.org/grants).

*Please type or print.*

## CONTACT INFORMATION

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Last Name

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First Name

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Title/Position

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School Name

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Mailing Address

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City

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State

---

Postal/Zip Code

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Telephone

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Fax

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Email

**PREVIOUS AWARDS**

Have you received a grant from the Engelmann Foundation previously?

Yes  No

\_\_\_\_\_  
If yes, when was your grant awarded?

**FUNDING REQUEST**

\$ \_\_\_\_\_  
Amount Requested

Please provide a brief explanation of why you are requesting funding (200 words or less).

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

If your funding request is granted, who should the check be made payable to?

\_\_\_\_\_

**SIGNATURE(S)**

By signing below, I certify that, to the best of my knowledge, the information provided on all parts of my application is accurate and complete. Further, my signature indicates I have read and agree to the Engelmann Foundation Grant Policies located at [www.engelmannfoundation.org/grants](http://www.engelmannfoundation.org/grants). I recognize that I will need to sign a letter of agreement before receiving funds.

\_\_\_\_\_  
*Signature (required)* *Date*

\_\_\_\_\_  
*Signature of person completing form (if different from above)* *Date*



**Email completed forms to:**  
**requests@engelmannfoundation.org**  
*or*  
**Fax to:**  
**541.683.7543**