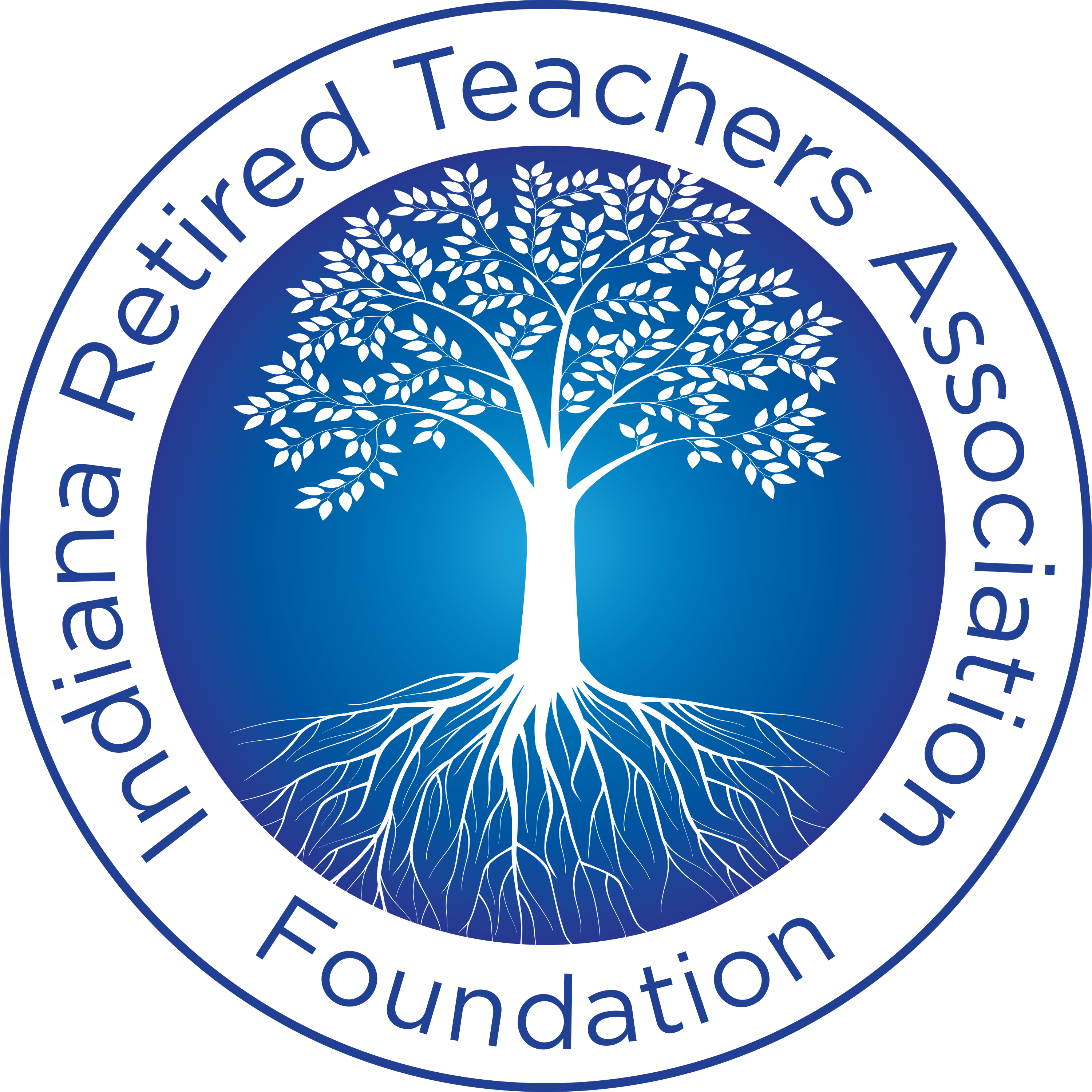
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**INDIANA RETIRED TEACHERS ASSOCIATION FOUNDATION**

**ACTIVE TEACHER GRANT APPLICATION COVER SHEET**

**GUIDELINES:**

**The Indiana Retired Teachers Association Foundation (IRTAF)** has grants available. A maximum of $500 will be awarded per grant. Each IRTA area may award no more than $1000 total funds per grant cycle. These special grants will provide additional funds to **public school educators** (**Pre-K through 12 who are TRF members**) so that their students will have the means to participate in special projects.

**Application Window:** August 15 through September 30 **Deadline:** Application Cover Sheet and Sections 1 through 4 materials must be electronically received or postmarked by **September 30**.

**Funds:** Funds may be appropriated in the areas of resources, leadership, research, or materials used by an active Indiana public school educator.

**Winners:** Winners will be notified by October 31. A one-page follow-up report including photo documentation (with appropriate release info from the school) suitable for use in IRTAF publications is requested from the grant recipient by May of the following year. Winners may apply another year with a different idea.

Thank you for your interest and commitment to further the excellence of education in the State of Indiana. For questions about this application, please contact the IRTA office at 1 (888) 454-9333 or http://www.retiredteachers.org

**APPLICATION:**

**NAME OF APPLICANT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_TRF#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HOME ADDRESS OF APPLICANT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**E-MAIL ADDRESS OF APPLICANT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**APPLICANT HOME PHONE (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ APPLICANT CELL PHONE (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE OF APPLICANT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SCHOOL CORPORATION \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**COUNTY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SCHOOL NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SCHOOL OFFICE PHONE (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SCHOOL ADDRESS** City/State/Zip Code\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
**SIGNATURE OF SUPERINTENDENT (OR SUPERINTENDENT’S DESIGNEE)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NAME OF LOCAL NEWSPAPER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**WEBSITE, PHONE NUMBER & CITY OF NEWSPAPER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

(Revised 1-18)

Office Use Only: IRTA Region \_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_

**INDIANA RETIRED TEACHERS ASSOCIATION FOUNDATION**

**GRANT APPLICATION SECTIONS**

**SECTION 1. Title and Description**

Describe your grant project proposal. Please identify the population involved and include a detailed description of the demographic area for which the funds will be used.

**SECTION 2. Purpose of the Project**

State the overall goal or objectives for pursuing your project. Explain what you hope to accomplish at the completion of the grant. Please do not submit requests for rewards such as gift cards or food. It is suggested that materials purchased with grant funds be reusable to sustain the project into the future or to be used in additional ways.

**SECTION 3. Evidence of Need**

Demonstrate the need for your project.

**SECTION 4. Proposed Budget Explanation**

Attach a list of materials and supplies with cost of each to show how the grant money will be spent. Your budget may exceed $500 but the grant will pay only up to $500.

\*Grant award check is payable to the school for use in funding your submitted project.

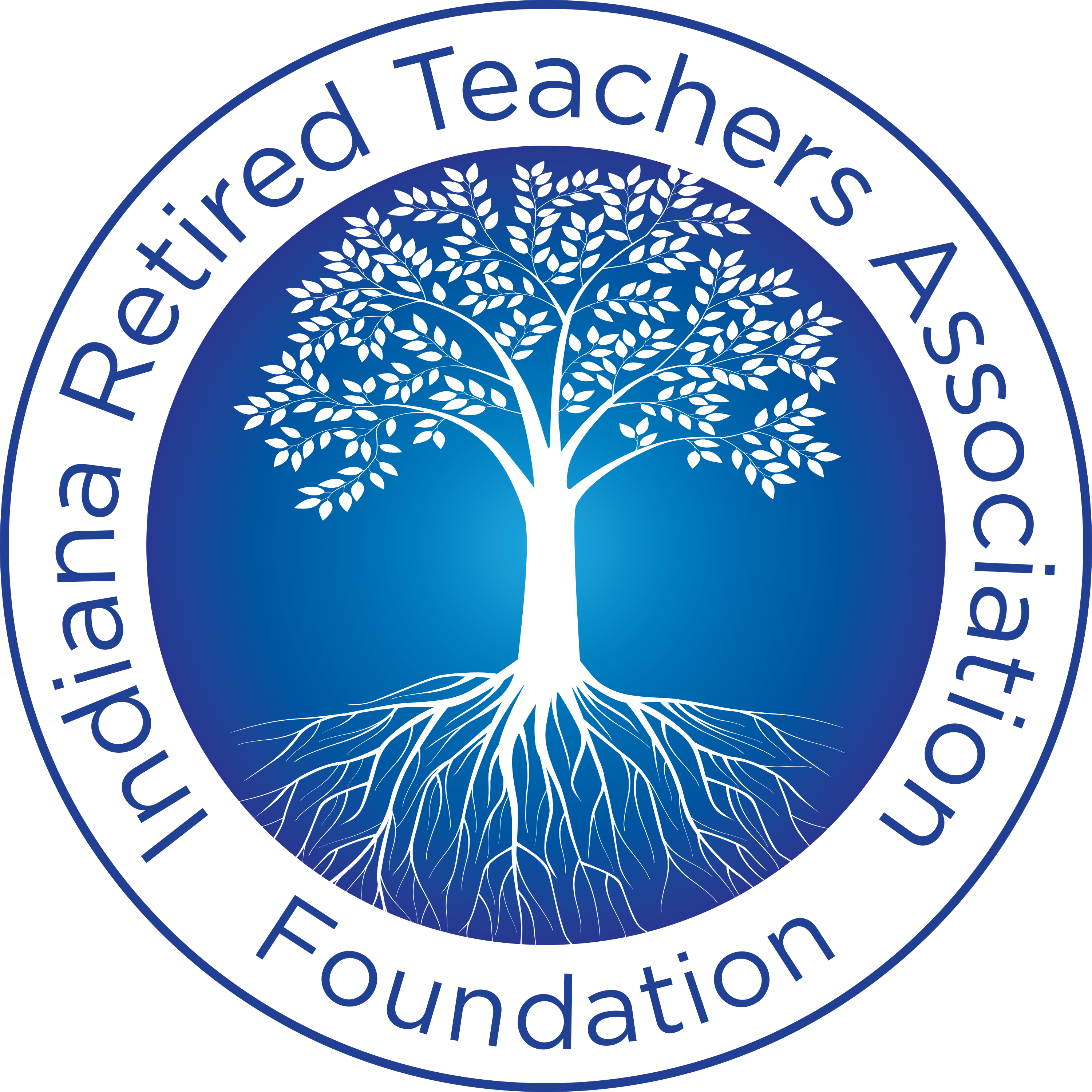
\*Check will be presented to you at your school.

**APPLICATION CHECKLIST**

ASSEMBLE YOUR APPLICATION IN THIS ORDER.

1. APPLICATION COVER SHEET
2. SECTIONS 1 THROUGH 4 COMPLETED. SECTIONS 1 THROUGH 4 SHOULD NOT EXCEED 4 PAGES. THE APPLICATION COVER PAGE DOES NOT COUNT TOWARD THE 4 PAGE LIMIT.

**REMINDER: YOU MUST SUBMIT THE ORIGINAL APPLICATION COVER SHEET AND SECTIONS 1 THROUGH 4 TO THE IRTA OFFICE** BETWEEN AUGUST 15 AND SEPTEMBER 30.



**INDIANA RETIRED TEACHERS ASSOCIATION FOUNDATION**

**2629 WATERFRONT PARKWAY EAST DRIVE, SUITE 105**

**INDIANAPOLIS, IN 46214**

**PHONE: 888-454-9333**

**FAX: 317-637-9671**

[**INFO@RETIREDTEACHERS.ORG**](mailto:INFO@RETIREDTEACHERS.ORG)