



The American Schooner Association
Education Grant Application

Date of Application:

Legal Name of Organization:

Year Founded:

Current Program Budget:

Program Manager:

Program Manager's Email:

Alternate Contact:

Alternate Contact's Email:

Business Address:

City, State Zip:

Mailing address (if different from above):

City, State Zip:

Phone:

Fax:

Website/Social Media:

Project Name:

Is this a new project or an on-going project?

Project Purpose: (Please attach additional sheets, if needed.)

Project Goals: (Please attach additional sheets, if needed.)

Beginning and Ending Dates of the Project: _____



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Geographic Area to Be Served:

Amount Requested: \$

Describe the population served in this project:

Approximately how many individuals will be served through this project:

If awarded this grant, how will the funds be used? (Please attach additional sheets, if needed.)

How does the description above benefit your project? (Please attach additional sheets, if needed.)

Please include a copy of your 501(c)3 documentation.

I certify to the best of my knowledge that the tax-exempt status of this Organization is still in effect.

Signature: _____ Title:

Date:

Please submit to edgrant@amschooner.org.