**AAUW-IL Local Engagement Grant Application**

To be completed by branch and returned to Carolyn Schjelderup (cs\_schj@yahoo.com) by June 30th or November 30th. Please feel free to use an additional page to answer these questions and attach documentation, but please be specific and concise. Requests with over 6 addendum pages will not be considered.

***Please note that the decision of the board is final.***

***Branches will receive funding for a maximum of one project per year.***

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name of Branch:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Branch President (name and contact information): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Estimated number of participants served by this project:

Amount of funds requested:

Please provide the title and description of your project, including goal of project, along with the timeframe for completion. Is this an established project or a new project? How does this project reflect AAUW’s Mission?

List your leadership team and their relationship to AAUW (member or non-member).

Have you received funding from AAUW’s National office for this project?

Do you have other organizations that are partnering with you? List the major partners and how many years have they worked with you (include in-kind donors).

If applicable, please describe the venue.

Will AAUW-IL receive acknowledgement in a program or signage? Where?

How will your group evaluate your project? What would you consider a success?

Attach a basic and simple budget showing funds collected or pledged and any remaining amounts.