

APPLICATION FOR GOLDEN GRANT

Name(s) _____ Chapter _____

Address _____ City _____

Title of proposed grant: _____

Proposed amount: _____ Duration of grant: _____

_____ First application for Golden Grant money

Or date(s) of previous applications _____

And date(s) of receipt of Golden Grant money _____

Would you be willing to present the results of this project/travel/research at a state meeting? Yes No

SUMMARY OF PROPOSED PROJECT/EVENT/RESEARCH: (including any ways in which the results will be publicized; any educational benefits that are anticipated for you, your chapter, school, community or profession.) Attach additional sheets if appropriate.

BUDGET: (include rationales for projected expenses and indicate any financial support from other sources) Attach additional sheets if appropriate.

APPLICANT(S) INFORMATION (each individual participating should provide name, address, professional position and experience, or volunteer organization, years of membership in the Society, involvement in Society activities) Attach additional sheets if appropriate.

Please attach three letters of support/recommendation; one of which is from the Chapter President and two from appropriate outside sources (such as administrators, community leaders, professional colleagues).