

The Pamlico County Education Foundation P.O. Box 27 Bayboro, NC 28515

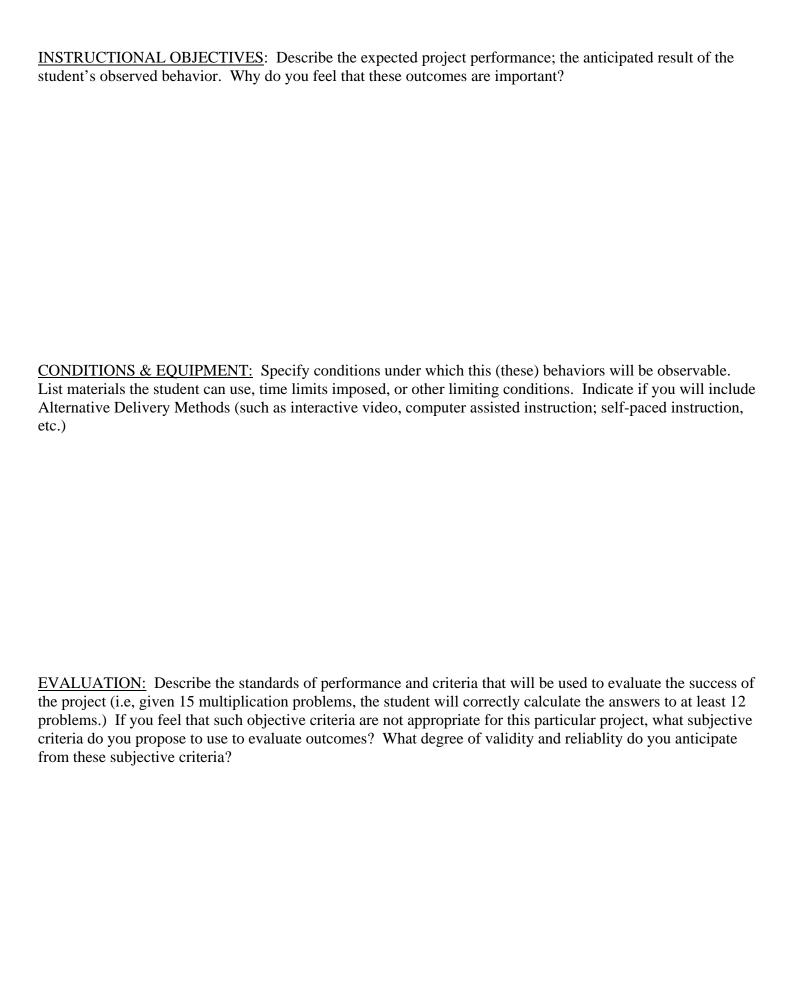
MINI-GRANT APPLICATION

TITLE OF PROPOSAL:		
NAME OF APPLICANT(S):		
SCHOOL:		
Grades and/or Department(s)		
PHONE:	(home)	(work)
E-MAIL ADDRESS:		
Principal's Signature:		
Date:		
Please send original to:		
Pamlico County Board of Education 507 Anderson Drive Bayboro, NC 28515 Copies of your application will be forward	rded to the PCEF.	
ACTION TAKEN BY REVIEW COMM	IITTEE: Date:	
Approved Full funding(amount) (amount)	_ Partial funding	
Not Approved		
Comments:		

PROJECT DESCRIPTION

PROJECT:		
NUMBER OF STUDENT TO BE SERVED BY TH		_
TARGET POPULATION: SUBJECT	GRADE LEVEL	
BUDGET REQUEST: \$		
GENERAL DESCRIPTION		

<u>SPECIFIC ACTION</u>: Describe the specific observable act that the learner is to perform. Use action words or verbs to indicate clearly what is to be performed by the student. These can include Simple Tasks (such as *describe, discriminate, recall, underline,* etc.); Study Skills (such as *categorize, diagram, quote, sort,* etc.); Synthesis Skills (such as *propose, rearrange, rephrase, expand,* etc.); or general applications as in the arts and sciences (such as *draw, mend, mix, sculpt, express, respond, verbalize, graph, weigh, calibrate, disagree, agree, participate, interact,* etc.)



DETAILED BUDGET REQUEST

List Each Item Separately with Approximate Cost: **TOTAL:** ADDITIONAL FUNDS: (Please explain if additional Funds are Available to you and list the sources of these funds.) PARTIAL FUNDING: Please indicate here if you will **not** accept PARTIAL funding on this project. Should this Mini-Grant proposal be funded, the undersigned accepts responsibility for fulfilling the objectives identified above.