**CORONADO FOUNDATION**
**FOR THE FUTURE, INC.**

## PROJECT APPLICATION

| Date | | Contact Name | |
|---|---|---|---|
| Project Title | | Phone No. Day | |
| Department | | Phone No. Eve | |
| Subject Area or Grade Levels served by Project | | Fax No. | |
| | | E-mail | |
| No. of Students served by Project | | Project Priority | |

**TOTAL FUNDING REQUEST:**

**STATEMENT OF NEED:**

**PROJECT DESCRIPTION:**

**PROJECT TIME LINE:** (*When will funds be expended?*)

**BUDGET:** (*Please itemize and be specific.  Are there other sources of funding? How would partial funding be used?*)

**It is understood that funded projects must submit an evaluation report at the project's completion or at a request for extension.**

Project Applicant_____ Principal _____

(Signature)                                          (Signature)

**CORONADO FOUNDATION
FOR THE FUTURE, INC.**

Dear Grant Applicant:

The mission of Coronado Foundation for the Future, Inc. is to expand the educational opportunities of Coronado High School students by:

- Providing grants and scholarship to students
- Supporting programs and teacher development
- Insuring that students and teachers have all the educational resources needed for a quality education
- Connecting CHS alumni and the community to Coronado High School

To that end the Board of Directors thanks you for your commitment to Coronado students and your participation in their quality education.  All grant applications, signed by the principal, will be considered, and every effort will be made to fulfill each request that falls within the mission of the Foundation.  Applications that serve the greatest number of students may be given priority.

The CFFF Board of Directors will determine the priority of grants awarded and reserves the right to amend the amounts requested.  All awards will comply with the policies of the Scottsdale Unified School District for such grants.

Please submit this application form to the Principal for review and signature no later the deadline on the website.


CORONADO FOUNDATION FOR THE FUTURE, INC.



Kevin Schirmer, President
Board of Directors

## PROJECT EXTENSION APPLICATION (Attach to completed application if the current request is an extension of a previous award)

**1. How many students (unduplicated) were served during current year?**

**2. What other sources of funds have been approached?**

**3. What sources of funds might be approached?**

**4. What evidence of project support do you have from:**

    **Staff?**

    **Parents?**

    **Students?**

Project Applicant_____ Principal _____

# PROJECT EVALUATION REPORT

| Date | | Contact Name | |
|---|---|---|---|
| Project Title | | Phone No. Day | |
| Department | | Phone No. Eve | |
| Subject Area or Grade Levels served by Project | | Fax No. | |
| | | E-mail | |
| No. of Students served by Project | | Project Completion Date | |

**DESCRIPTION OF PROJECT AS IT OCCURRED** (Include time frame)

**How was the money spent?**

**How was the project viewed by**
   **Staff?**

   **Parents?**

   **Students?**

**Suggestions for similar future projects** (*Things to avoid, ways to improve, please attach separate page*)**:**

Project Applicant_____ Principal _____