



<b>Association / Contact Information</b>	
Association Name:	
Contact Name:	
Mailing Address:	
Telephone:	
Email Address:	
<b>Request Information</b>	
Date of Request:	
Amount of Request:	
Category of Request:	<input type="checkbox"/> _Statewide <input type="checkbox"/> _Regional/Local <input type="checkbox"/> _Education <input type="checkbox"/> _Internship
<b>Project Information</b>	
Project Title:	
Project Summary:	
How will project help your association?	
Will project be helpful to other areas of the state?	
How will project impact the industry?	
How do you plan to disseminate information about this granting organization should you be funded?	
Explain how your results will be made available?	
Project Completion Date:	
Budget & Timeline:	

*Continue on a separate sheet if necessary*

<b>For Office Use Only</b>	
Request Approved:	_____
Amount Approved:	_____
Payment Schedule:	_____
Approval Signature:	_____