



ALPHA DELTA STATE OHIO EDUCATIONAL FOUNDATION INDIVIDUAL/CLASSROOM/COMMUNITY PROJECT FUND

PROJECT FUND PURPOSE

To provide up to five hundred dollars (\$500.00) in financial support for educational projects that fund targeted learners in schools or non-profit or community-based settings.

SUBMISSION REQUIREMENTS AND GUIDELINES

1. Project Applications may be submitted any time; however, any submissions after May 1st may be considered in the next fiscal year beginning July 1.
 - a. The Project Leader will be notified by email when the application is received.
 - b. A letter of approval or denial of the application will be sent following a meeting of the ADSOEF Educational Services Committee and a final decision by the ADSOEF Board of Directors.
2. If the project is accepted, the Project Leader must sign, date, and return the Certification of Acceptance form within ten (10) days of the acceptance and return to the Educational Services Chairman.
3. Upon receiving the signed Certification of Acceptance form, the Educational Services Chairman will prepare a voucher and send it to the ADSOEF Board Chairman, and then the check will be issued to a school or non-profit entity, rather than an individual.
4. If changes must be made to the project, then the project leader must submit a revised application to the Educational Services Chairman for reapproval. Reapproval of the revised application is not guaranteed.
5. Upon Project completion, the Project Leader shall
 - a. send electronic copies of all receipts for items purchased with ADSOEF project money to the Educational Services Committee Chairman within two weeks of project completion,

- b. prepare and send to the Educational Services Committee Chairman a written article with photographs suitable for publication explaining the project's outcome, and impact.
6. Project recipients will be acknowledged at the ADSOEF Annual Meeting and in the ADSOEF newsletter, *Foundation Matters*.
7. Failure to complete these requirements (#2-5 above) will affect future funding through ADSOEF.
8. Email all correspondence to:

Christine Snoddy, Chairman Educational Services

Email: ckvs@sprynet.com

Application Evaluation Criteria:

Originality
Broad Reach
Completeness
Monetary Amount

PROJECT FUND APPLICATION (2 pages)

Title:

Type (Individual, Classroom, or Community):

Project Leader Member's Name:

Chapter:

DKG Membership Number:

Address:

Email:

Phone:

Names/Positions of others collaborating on this project:

Project Site:

Amount Requested:

Project Summary:

Describe the project giving its purpose, who will benefit from the project, how the project will be carried out and why it needs to be completed.

Project Start and Completion Dates:

Project Beneficiaries (*approximate numbers*):

Research Documentation (*supporting methods used to address needs in this project*):

Specific Results expected from this project:

How you will measure results:

Budget (*Include item descriptions and costs*):

Grand Total:

Can the project be completed if it is only partially funded? If so, please prioritize budgeted items to indicate which are essential and which might be otherwise supplied if total project funding is not available from ADSOEF. Include all funds from other sources.

Letters of Support:

Three (3) letters of support must be sent directly from the supporting individuals to the Educational Services Chairman via email.

Please list individuals writing letters of support:

Signature of Project Leader:

Signature of Chapter President: