

Abby Kelley Foster Educational Foundation, Inc.

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FUNDING APPLICATION

(Revised 9/17/22 and subject to change.)

Name(s):		
Title:	Email:	
Department:	Please Circle: ES	MS HS
roject Title: Amount requested: \$		d: \$
Attach a detailed explanation of this project incapplicable, people involved, number of student the mission of the school and what you expect to a	s and grades, etc. Be sure to note he achieve and how will you know if the	ow your proposal support project was a success.
Who will oversee the implementation of your pro	ject?	
Please check the category of the Mission Fund that	at this proposal supports:	
 □ Academics □ Music □ Art □ Character Formation □ Athletics □ Technology □ International Baccalaureate Programme □ Other: If the Abby Kelley Foster Educational Foundations still benefit from a lesser amount? (Please circult yes, please explain. 		equested, would the project
Have you previously requested funding for this project with your this form.		
I agree upon the use of these funds to give a final Educational Foundation Office.	written accounting of their use to the A	Abby Kelley Foster
APPLICANT'S NAME	SIGNATURE	DATE
FOR OFFICE USE ONLY: DATE APPLICATION AND VENDOR PRICE QUOTE, IF APPLICABLE, ID DATE REVIEWED BY EDUCATIONAL FOUNDATION BOARD OF DIRECT OF THE PROPERTY OF T		
□ DENIED		
AUTHORIZED SIGNATURE:	DATE:	
DATE RESPONSE SENT TO APPLICANT:		