

7. Will funding be requested of other organizations? What dollar amount do you expect to receive?

8. What are the means of evaluating this project?

9. What are the methods for reporting the results of this project to the Mentor Schools Foundation?

10. What are the projected times/dates of implementation and duration?

11. Other comments: (Attach additional pages, if needed.)

SEND PROPOSALS TO:

**Mentor Schools Foundation
6451 Center Street
Mentor, OH 44060**

Signature of Project Director

Principal's Signature

Date of Application

Assistant Superintendent

For Foundation Use Only:

Grant No. _____ **Date Received** _____

Approved: **Yes** **No** **Amount** _____ **Date** _____

(Application revised 7/16)