



Grant Cover Sheet
Due June 30 or Aug 31

Please furnish all requested information. Email the completed form and specific proposal to ictmgrants@gmail.com.

Type of Grant Requested – Check one (Please complete a separate cover form for each type of grant requested.)

- ICTM Curriculum Grant (up to \$500) Due June 30.
- ICTM Advanced Tuition Grant (up to \$500) Due June 30.
- NCTM Conference Grant (up to \$800) Due June 30.
- ICTM Conference Grant (up to \$200) Due Aug 31.
- ICTM Extra-Curricular Mathematics Grant (up to \$250) Due date June 30.

Primary Applicant's Name: _____

Current Professional Assignment: _____

School Name and Address: _____

Preferred Email address: _____

School Phone Number: _____ Personal Phone Number: _____

Home Address: _____

Grant Title: _____

Start date for Grant: _____ End date for Grant: _____

Total Budget Request (see Budget Request Form for details): _____

The Principal's signature (digitized image ok) below indicates his/her support for the grant and his/her willingness to allow the results to be used in news releases or other public information purposes.

Date

Signature of Applicant

Date

Signature of Principal