HARWARD CENTER FOR COMMUNITY PARTNERSHIPS

Volunteer Service Grant

APPLICATION COVER PAGE

Name: ___________________________ E-mail: ___________________________ Class: ___________________________

Campus Mail: ___________________________ Campus Phone: ____________

Project for which funds are sought: ___________________________

Community organization: ___________________________

Community contact person: ___________________________

Starting date: _______________ Ending date: _______________

Approximate number of Bates students involved: ____________

Approximate number of community members involved: ____________

Have you applied before for this project or for anything? _______________

What other funding has been applied for or received to support this project?

________________________________________________________

Amount of funding requested:

• maximum for volunteer project—$250 per individual, $500 for group

• Funds paid as reimbursement through original receipts.

Application must include:

• Completed cover page

• Explanation of the volunteer project that the grant will support (on separate sheet) including:
  o Description of the project
  o A description of the agency you will serve
  o The service your work will provide

• A budget of your expenses

Please limit your remarks to one page maximum. Applications are accepted on a rolling basis as long as funds remain available. Please submit your application to the Harward Center for Community Partnerships at 161-163 Wood Street.

Applicant signature: ___________________________ Date: ___________________________

8/2006