

WESTERN OHIO EDUCATIONAL FOUNDATION

Supporting Students...Transforming Communities Since 1962

Wright State University-Lake Campus • 7600 Lake Campus Drive • Celina, OH • 419-586-0376

2017-2018 WOEf Grant

Guidelines

APPLICATION

Grant requests can be submitted by Lake Campus faculty, staff, and/or students. Grant requests must be submitted on the WOEf Grant Application Form and **must** be pre-approved by your Unit Head/or Supervisor first then the Dean of the Lake Campus.

DEADLINES

The grant application deadline is September 15th for the Fall Semester grant cycle, and on February 16th for the Spring Semester grant cycle. Pay special attention to the table below to make sure that your application is submitted and available for review by the Board prior to the date that the funding is required.

DEADLINES & TIMELINES	FALL GRANT	SPRING GRANT
Grant application deadlines:	September 15, 2016	February 15, 2017
Notification of selection:	September 26, 2016	February 27, 2017

Grant requests cannot exceed \$1,500 per application and requests must be for the benefit of students. Applicants must complete this information to apply:

1. This complete application
2. A quote, invoice, itinerary, or picture of a pending shopping cart showing the amount and prices of product(s) you are wanting to purchase or trips you are seeking travel money for
3. A short paragraph stating your project/and or trip, why you are requesting funds, and what benefit will be added to students by completing this project/and or trip

Grant applicants who receive funds will be **required to attend a monthly WOEf Board meeting** to talk about the use of grant funds.

CONTACT INFORMATION

For more information about grant funding, please contact Courtney Donovan, WOEf Scholarship Coordinator at (419) 586-0376 or courtney.donovan@wright.edu.

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2017-2018 WOEf Grant Application *Application*

1. Name: _____

2. Title: _____

3. Email: _____

4. Amount you are requesting: _____

5. What are you requesting money for? (check all that apply)

<input type="checkbox"/>	Food or entertainment	<input type="checkbox"/>	Trip
<input type="checkbox"/>	Products or supplies	<input type="checkbox"/>	Other

6. Project/and or trip name: _____

7. Date(s) of event or trip if pertains to your grant: _____

Applicant Signature

Date

Unit Head/or Supervisor Signature

Date

Dean's Signature

Date

Please attach product or travel prices and the short paragraph to this application and either email or send to Courtney Donovan. Good luck!