

**TRI-CREEK EDUCATION FOUNDATION, INC.**



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[www.t-cef.org](http://www.t-cef.org)

**2025-26 GRANT APPLICATION  
~COMPLETE ALL PAGES~**

**FOR FOUNDATION USE**

Date Submitted: \_\_\_\_\_

Funded? \_\_\_\_\_

Grant Number: \_\_\_\_\_

Amount Requested: \_\_\_\_\_

Amount Awarded: \_\_\_\_\_

School: \_\_\_\_\_

Project Director: \_\_\_\_\_ Email: \_\_\_\_\_

Position: \_\_\_\_\_ School: \_\_\_\_\_

Preferred Phone: \_\_\_\_\_

Other Staff Members Working on This Project: \_\_\_\_\_

**PROJECT TITLE:** \_\_\_\_\_

**AMOUNT REQUESTED:** \_\_\_\_\_

If you receive partial funding, will you still be able to do this project? \_\_\_\_\_

**TARGET GROUP:**

Number of Students: \_\_\_\_\_ Subject/Course \_\_\_\_\_

Grade Level: \_\_\_\_\_ Number of Staff Members: \_\_\_\_\_

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**GRANT APPLICATION**

Please include all of the information requested below. Applications must be in the TCEF school mailbox at the Tri-Creek central office by 4pm on September 13, 2024.

What is the purpose of your project? What do you hope to accomplish with TCEF funding?

Provide a brief narrative of your project and describe the experiences you will provide for students.

**Anticipated Dates of Project Activities**

Activity	Date

How will this project be sustainable after the grant funding year? What plans do you have to replicate this project in the future?

What strategy/strategies will you use to assess the impact of your project?

**TCEF Competitive Grant Budget**

<i>Category</i>	<i>Unit Price</i>	<i>Quantity</i>	<i>Total</i>
<b>Materials &amp; Supplies (list)</b>			
<i>Estimated Shipping &amp; Handling</i>			
<b>Equipment</b>			
<i>Estimated Shipping &amp; Handling</i>			
<b>Purchased Services (tickets, speakers, registrations, etc.)</b>			
Other Costs			
<b>GRAND TOTAL REQUESTED</b>			

**ANTICIPATED INCOME (if applicable) – Include any district funding earmarked for the project.**

<i>Category</i>	<i>Unit Price</i>	<i>Quantity</i>	<i>Total</i>
<b>TOTAL ANTICIPATED INCOME</b>			

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PRINCIPAL'S COMMENTS ABOUT PROJECT:

**SIGNATURE OF PRINCIPAL:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

◆◆◆◆◆◆◆◆◆◆

**SIGNATURE OF PROJECT DIRECTOR:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

◆◆◆◆◆◆◆◆◆◆

***PLEASE REVIEW THIS CHECKLIST BEFORE YOU SUBMIT YOUR APPLICATION.***

\_\_\_\_\_ I have read **Guidelines and Tips for a Successful TCEF Grant Proposal.**

\_\_\_\_\_ I have checked with my building principal/technology director/curriculum director to see if district funding is available for this project.

\_\_\_\_\_ I have completed all sections clearly and succinctly.

\_\_\_\_\_ My principal has commented and signed off on the proposal.

\_\_\_\_\_ I have submitted a budget, including shipping and handling costs.

\_\_\_\_\_ I have printed a copy of the proposal, to be submitted to the TCEF mailbox at Tri-Creek's central office by 4pm on September 13, 2024.