



Batesville Community Education Foundation

BCEF

Cultivating Innovation in **Local Education**

BATESVILLE COMMUNITY EDUCATION FOUNDATION GRANT APPLICATION

Name: _____

Address: _____

Email/Phone: _____

Amount of Funds Requested: _____

Project Summary: _____

Goal: _____

Project Need (Describe the need & # of students impacted): _____

Project Timeline (Do you need funds by a certain date): _____

Funding Sources (Have you received other funding and what other opportunities for additional funding do you have): _____

Principal Comments: _____

Please e-mail completed forms to info@batesvilleeducationfoundation.org or mail to: P.O. Box 121, Batesville, IN 47006.