**DFSME SEED GRANT INQUIRY FORM**

Please fill out this form and e-mail it to

[anne.dfsme@gmail.com](mailto:anne.dfsme@gmail.com) at the DFSME offices for review.

Anyone is welcome to apply. Once it is determined whether or not your request fits our current grant cycle and has been reviewed by the Program Committee, we will contact you either with an invitation to submit a full grant proposal online, with a request for further information, or an explanation of the reason for rejection.

**PROGRAM OVERVIEW**

**Program Name:** Click or tap here to enter text

**Amount Requested:** Enter amount here

**Are you replicating a program that has been successful in another community?**

Yes  If yes, please identify program and location here   
No

**Briefly Describe:**

* The **NEED** you have identified:   
  Begin typing here, maximum of 300 words.
* Your **GOALS** of the program:   
  Begin typing here, maximum of 300 words.
* Expected **OUTCOME**/**SOLUTIONS**:   
  Begin typing here, maximum of 300 words
* Your targeted **POPULATION**/**GEOGRAPHIC** area:   
  Begin typing here, maximum of 300 words

**You must be able to answer yes to the following 4 questions in order to be considered for this grant. IF selected, supporting documentation will be requested in the next phase of process.**

* Does it align with DE math or science standards? Yes
* If you are a private school/institution, do you agree to open the program to   
  public participants? Yes
* Can you provide a letter of support from your administrator/principal/leader? Yes
* Can you provide a letter of agreement from your facility/institution If this   
  program is to be run at your, or another, facility/institution? Yes

**FUNDING**

**Have you...**

* Requested District funding? Yes  No
* Requested funding from other sources? (parent teacher organizations, businesses, Department of Education, other non-profit organizations, etc.) Yes  No
* List other funding sources and amounts (indicate whether the funding decision is pending, promised or already awarded):   
  Begin typing here, maximum of 300 words.

**CONTACT**

**Your Name:** Click or tap here to enter text

**Your Organization:** Click or tap here to enter text

**Address:** Click or tap here to enter text

**Phone:** Click or tap here to enter text

**Email:** Click or tap here to enter text