

NASA CT SPACE GRANT CONSORTIUM

**Informal Education Grant Application**

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| **Indicate type of application:** |
| Project/Event  Internship |

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| --- | --- |
| **Project/Event or Internship Title:** |  |
| **Project/Event or Internship Description: (250 word maximum)** |  |

|  |  |
| --- | --- |
| **Applicant Contact Information:** | |
| Name: |  |
| Title: |  |
| Organization: |  |
| Email: |  |
| Phone: |  |
| Address: |  |
| City/State/Zip Code: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Project/Event Activity or Internship Date(s) (mm/dd/yyyy):** | | | |
| Start Date: |  | End Date: |  |

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| **What is the expected duration of project/event:** |
| Short Event (< 2 Days)  Long Event (>2 Days)  Multi-Month (Semester/ Quarter)  Year-Long (12 Months) |

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| --- | --- | --- | --- | --- |
| **Location of Project/Event:** | | | | |
| Name: |  | | | |
| Address: |  | | | |
| City/State/Zip Code: |  | | | |
| **Enter the anticipated number of participants that will participate in project/event or benefit from internship:** | | | | |
| **Participant Type** | | **Count** | **Participant Type** | **Count** |
| K-12 Teachers | |  | Higher Education |  |
| K-12 Students | |  | Other Community Members |  |
| **Total Participants** | |  |  |  |

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| Describe the involvement of K-12, higher education, and other community members in this project/event or internship (if applicable): |
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| Provide a timeline for this project/event or internship: |
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| Complete budget (see Appendix A) and include a brief narrative of expenditures and in-kind contribution(s). Please note: the budget should provide at minimum a 1:1 match (direct or in-kind) (e.g., if you are requesting $500 in funding, a minimum $500 match should be provided by organization): |
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| --- | --- | --- | --- |
| Applicant Signature: |  | Date: |  |
| Applicant Name: |  |

**Appendix A: Budget**

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| --- | --- | --- | --- |
| **Item** | **Request** | **Match** | **Total** |
| Salary/stipend |  |  |  |
| Equipment | Not permitted |  |  |
| Supplies |  |  |  |
| Transportation |  |  |  |
| Facility rental/usage |  |  |  |
| Food |  |  |  |
| Other (please specifiy) |  |  |  |
| **Total** |  |  |  |

**Submission Instructions:**

1. Complete Informal Education Grant Application
2. Send Informal Education Grant Application in PDF format to [ctspgrant@hartford.edu](mailto:ctspgrant@hartford.edu)

**Important Information:**

1. Application priority deadlines are March 1st (for award period April 1st to June 30th) and June 1st (for award period July 1st to December 31st); applications received after priority deadlines will be reviewed on a rolling basis and awarded if funds are available
2. You should receive notice of award within 3 weeks of submission
3. If awarded, you can anticipate receiving funds approximately 6-8 weeks after submission
4. You must prepare a short post-award description of the outcomes of the project/event