

## **2017 Classroom Empowerment Grant Application**

Applicant Name:		Title:	
School Name:			
School Address:			
City:	Zip:	Phone:	
Email:			
Name of Submitted Project:			
Eligibility is limited to schools local and administrators of K-12 public a awarded. Egyptian Electric Cooper use the photos for publicity purpose semester. Incomplete entries will be provide written proof of completion the project's completion.	and private schools mative reserves the rig es. Projects must be e deemed ineligible a	ay apply. Eight \$500 grants will be ht to photograph the grant winners completed by the end of the spring and will not be judged. Recipients r	e s and g 2018 must
Submitting & Deadline: Grant approximation: Egyptian Electric Cooperate mailing bguthman@eeca.coop, or our office no later than 4 p.m. Frid December 15, 2017.	tive, Attn: Brooke Gut r faxing to (888) 554-	hman, P.O. Box 38, Steeleville, IL 3181. The application must be rec	62288, eived to
For additional questions, please phone, (800) 606-1505, or email, b		• • • • • • • • • • • • • • • • • • • •	tive by
Judging Process: Applications will applicants may be contacted for ac		mpartial panel of judges. If necess	sary,
If I,	roof of completion wi	e the grant, I pledge to follow all co thin six months of my project's end	ompletion d.
Signed:(Teacher or Ac		Date:	
(Teacher or Ac	lministrator)		

This form must be attached as a cover to the grant request. Please read official rules, found on our website, www.eeca.coop, or in our office, before completing this form.

