**Wisconsin FFA Alumni & Supporters Chapter Grant Application**

Please check the box for which grant you are applying for.

Support Grant New Chapter Grant Reactivation Chapter Grant

Applications may be submitted at any time during the year. They will be reviewed and voted on at the quarterly council meetings. There is a required follow-up report that must be completed within 60 days of the completion of the project or use of all awarded funds.

Please send application to: [**tcostello@wisconsinffaalumni.org**](mailto:tcostello@wisconsinffaalumni.org)

FFA Alumni Chapter Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FFA Alumni Chapter Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Please answer the following questions completely, so that the membership committee and the Wisconsin FFA Alumni council better understand your FFA Alumni Chapter’s ambitions.

1. How would your FFA Alumni Chapter use this grant funding?

Click here to enter text.

1. Please explain three goals/objectives that your FFA Alumni Chapter would like to accomplish with the grant funding.

Click here to enter text.

1. Please lay out and explain the budget for the project?

Click here to enter text.

1. What is your FFA Alumni Chapter’s timeline for completing the project?

Click here to enter text.

I certify that this FFA Alumni Chapter meets the criteria for the Wisconsin FFA Alumni Support Grant and that the chapter will submit the Follow-Up Report no later than two months after the project is complete.

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(Chapter President’s Name - Print) (Chapter President’s Name - Signature) (Date)