

**KADES-MARGOLIS CORPORATION**

**MINI-GRANT APPLICATION**

**DEADLINE TO APPLY: FRIDAY, MAY 27, 2017**

Principal's Name: \_\_\_\_\_

PA Principals Association Member Number: \_\_\_\_\_

School Name: \_\_\_\_\_

District Name: \_\_\_\_\_

Elementary Configuration (K-5, K-1, etc): \_\_\_\_\_

Principal's Phone Number: \_\_\_\_\_

School Address: \_\_\_\_\_

\_\_\_\_\_

Describe how you propose to utilize the \$1,000.00 mini-grant to benefit the students in your school (do not exceed 2 pages): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

