

## Mini-Grant Application

Please mail your description along with this form to:

**Grafton Land Trust**Attn: Mini-Grant Application
P.O. Box 114, Grafton, MA 01519

Grant Author (s)	
Project Name	
Project Name	
School	
School Phone	
	Number of students directly participating
	Amount of money requested (\$300.00 maximum)
School Administ	rator's Signature:
	GRANT APPLICATION PROCESS
1. Comp	GRANT APPLICATION PROCESS  slete the above section of this form.
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2. Clearl Please	plete the above section of this form.  y describe your project in one to three typewritten pages attached to this form. e include the following:  pject goals (reflecting GLT interests as stated on the Programs and Education web page.)
2. Clearl Please Pro	plete the above section of this form.  y describe your project in one to three typewritten pages attached to this form.  e include the following:  pject goals (reflecting GLT interests as stated on the Programs and Education web page.)  pject summary
2. Clearl Please Pro Pro	plete the above section of this form.  y describe your project in one to three typewritten pages attached to this form. e include the following:  pject goals (reflecting GLT interests as stated on the Programs and Education web page.)  pject summary  pjected expenses (It is recommended that, whenever possible, you use local (Grafton) vendors for your purchases of goods and/or services.)
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Signature of applicant (s)