## **Sandtown Foundation Grant Application**

## **Application Information**

Westlake Cluster School:	
	Mailing Address:
	Street Number and Name
	City, State Zip Code
	Contact name
	Contact Title
	Phone Number (DAY)
	Evening Phone Number (EVENING)
	Email Address
Grant Profile:	
	Project/Program Purpose:
	Description of Project/Program:
	Expected Results:
	Number of Students Involved/Impacted:
	Amount Requested:
	(Enter or Copy/Paste budget with all expenses itemized and explained)
	Are there other funding sources?
	If yes, please provide the status of alternate funding as follows:
	Pending Amount
	Confirmed Amount
	Please provide a plan or source for fundraisers and/other alternate funding
Please print and mail the completed application to the address below and retain a copy for your records	

Sandtown Foundation, Inc. P. O. Box 43484 Atlanta, GA 30336