

**Community Action Team
SUMMARY GRANT
APPLICATION FORM**

TITLE _____

FUNDING _____

DURATION DATES _____ **TO** _____

BACKGROUND

GOALS AND OBJECTIVES

BUDGET

SALARIES & WAGES	_____
SUPPLIES	_____
TRAVEL	_____
SPACE COSTS	_____
OTHER DIRECT COSTS	_____
ADMIN CHARGES	_____
TOTAL	_____ 0

Draft Motion: