**Section 1: GRANT REQUEST & OVERVIEW**

**PLEASE SUBMIT GRANT REQUETS A MINIMUM OF 30 DAYS PRIOR TO WHEN PAYMENT IS NEEDED.**

JCP Student Club/Organization  Faculty/Administration  JCP Department

Date Submitted to FOJ: Click or tap to enter a date.

JCP Organization/Department Requesting Funds: 

Amount:  Date Needed: Click or tap to enter a date.

Requestor (Full Name): 

Requestor Email:  Requestor Phone: 

*\*Students may not submit grant applications*

**Section 2: GRANT DETAILS**

**NOTE: PLEASE READ THE FOJ GRANT INSTRUCTIONS AND GUIDELINES. This application will be reviewed by JCP Administration/Finance Director in addition to Friends of Jones.**

Grant Description: Number of JCP Students in Organization/Department directly impacted: 

Reason(s) for Grant Request (check ALL that apply):

Non-CPS Vendor Unplanned Expense

Gap Between Jones School Budget  Gap Between Family Contributions

Gap Between Fundraising  Other, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have JCP families contributed:  Yes, how much? \_\_\_\_\_\_\_\_\_\_  No, why not?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has any fundraising been done:  Yes, how much? \_\_\_\_\_\_\_\_\_\_  No, why not?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\*If you are aware of any students that require special assistance or need-based funding, please reach out to JCP Administration for more information.*

**Section 3: GRANT EXPENSES / BUDGET**

**NOTE: THIS SECTION MUST BE COMPLETED. Please list ALL expenses, including items not being requested from FOJ.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Description/Quantity of item** | **Total cost of item** | **Amount requested from FOJ** | **Amount covered by other sources** |
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|  | **Total costs of items** | **Total requested from FOJ** | **Total from other sources** |
|  | $ | $ | $ |

**Please submit any invoices, quotes, W-9s, and other supporting documents (if available in advance) to grants@friendsofjones.org.**