

## CWC Patricia M. Thornton Group Education Grant Application

1. Applying Local Chapter \_\_\_\_\_

Local Chapter President \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Office Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Email \_\_\_\_\_

2. Name of Trainer \_\_\_\_\_

Address of Trainer \_\_\_\_\_

3. Program Title \_\_\_\_\_

4. Program Beginning Date \_\_\_\_\_ Program Ending Date \_\_\_\_\_

5. Total members participating \_\_\_\_\_ Total Participants \_\_\_\_\_

6. Total Amount Requested \_\_\_\_\_

7. Send Check to ( ) Local Chapter President ( ) Trainer

8. Include the following documentation:

- a) Expense breakout of costs of training (not including refreshments)
- b) Summary of program objective (Flyer will suffice)
- c) Training description (may be included on flyer)
- d) Final list of attendees with membership verified (such as sign in sheet)

9. Local Chapter President Signature \_\_\_\_\_ Date \_\_\_\_\_

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