

LOCAL ASSOCIATION GRANT  
GRANT PROPOSAL

Local Association \_\_\_\_\_

Person Responsible \_\_\_\_\_

Address \_\_\_\_\_

Phone #s Home \_\_\_\_\_ School \_\_\_\_\_

Strategic Goal for which grant is submitted: \_\_\_\_\_

\_\_\_\_\_

Statement of Purpose for this grant: \_\_\_\_\_

\_\_\_\_\_

Narrative Description: (identify each major activity)

Amount of funds requested: \_\_\_\_\_

UniServ Director was consulted. \_\_\_\_\_

Submitted to SDEA/NEA President, 411 E. Capitol, Pierre, SD 57501  
for review.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Local President