



• • • Form should be filled out by school personnel only • • •

School Name & Address : _____

Student Name: _____ **Grade:** ____ **Age:** ____

Nominated by: _____ *Your position:* _____

Telephone: _____ Email: _____

Enrichment requested:

Anticipated costs: \$ _____
Will the enrichment program provide any assistance? Yes / No

Payable to & Mailing Address: _____

Statement of Need:

How are you able to verify the financial need of this student? Does this student receive other assistance through the school?

Potential Benefits:

Why has this activity been suggested? How will the student benefit?

Provide any additional relevant information:

Guardian approval must be obtained before the application is submitted for consideration. *Has the guardian approved this grant submission?* Yes / No

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Applications should be emailed to grants@JDLfoundation.org or mailed to:

The John D. Langley Foundation, 10 Common Street #4, Walpole, MA 02081