

NOTICE!

**OWEGO APALACHIN FOUNDATION FOR
EXCELLENCE IN EDUCATION**

PO BOX 576, APALACHIN, NY 13732

OAFoundation.com

**IS NOW ACCEPTING GRANT APPLICATIONS THROUGH
February 28th OF THIS YEAR!**

Who we are: The Owego Apalachin Foundation For Excellence in Education is a community wide, independent, not-for-profit organization. The Foundation's mission is to enhance the education of the students within the Owego Apalachin district boundaries, public & non-public, by providing private funding and stimulating community support for innovative and challenging programs.

Changes: In an effort to get you your money *before* the new school year, our grant period is Feb 1st through February 28th. Application forms may be requested from **February 1st to February 28th**. Or the application forms may be downloaded at our website up to the February 28th deadline. Grants will be awarded at our Annual Grants Award Ceremony this year on *April 25, 2012 at St. Patrick's School*.

Who can apply?: Ideas for grants can be submitted by students, teachers, staff, parents, residents, businesses and/or agencies. The Foundation will be looking for ideas that will help prepare students for the challenges of the new century and enhance their educational experiences.

Grant amounts: The Foundation encourages grant requests up to \$500.00 per grant. Only one request per program. Multiple grants will be awarded in one period. Grants must be used within one year of acceptance. No stipends will be accepted.

How do I apply?: To apply for a grant application, fill out this form to submit a written request with the information below, to:

*Owego Apalachin Foundation For Excellence in Education
PO Box 576, Apalachin, NY 13732*

After receiving the written application request, a copy of the application with instructions will be mailed to you.

Or

You may download the application from our website ONLY: OAFoundation.com

Completed grant applications must be received or postmarked
on or before February 28th of this year.

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone Number(s): _____
Organization: _____