Women's Giving Circle Grant Application

Grant Budget Request

College or Unit Affiliation: **College of Education and Health Professions**

Proposal Title: Women's Giving Circle of LIFE (Language Intervention for Family Enrichment)

Primary Contact Name: Rachel Glade

(Itemized summary of planned expenses for 2017 grant cycle & estimated income for the period.)

Expenses

Item	Total Proposal Budget (1)	Amount Already Funded (2)	Amount Needed	Amount Requested from WGC (3)
Personnel				*
Fringe Benefits				*
Travel				*
(e.g. airfare)				
Student Compensation	1000		1000	1000
Equipment	1000		1000	1000
Supplies / Materials	800		800	800
(e.g. medical syringes)				
Marketing	200		200	200
(e.g. brochures)				
In-Kind Goods/Services	7,000		7,000	7,000
Other				
Total Expenses	**10000**		**10000**	**10000**

Funding Commitments to Date

Source	Amount Committed (2)	Open Grant Requests (Grants requested but not committed)
Subtotal	*0*	*0*
Total Income	**0**	

Minimum funds requested from WGC
10,000

*
Black boxes represent line items the WGC does not fund.

Comments: Please use this section to explain / clarify any line item.

This program and budget request would fund this program for the summer 2018 program.
OTHER: This funding will be used for scholarships for all the families participating in the program. This funding would cover 8 children/families across the (10-week) summer 2018 program. This parses down to just under $44 per week per family unit and would allow for student clincians to gain valuable clinical experience under the supervision of a licenced speech-langauge pathologist while collecting reserach for this project. This funding would allow families to participate in this program who otherwise have no options for educationally based childcare for their child with special needs over the summer months.