Wisconsin FFA Alumni & Supporters Chapter Grant Application

PI	ease check the box for which gran	t you are applying for.
Support Grant	New Chapter Grant	Reactivation Chapter Grant
		vill be reviewed and voted on at the quarterly council eted within 60 days of the completion of the project funds.
Plea	se send application to: tcostello@	Owisconsinffaalumni.org
FFA Alumni Chapter Name: _		
FFA Alumni Chapter Mailing	Address:	
Contact Person:		_
Phone Number:		
E-mail Address:		
Amount Requested:		
	questions completely, so that the stand your FFA Alumni Chapter's a	membership committee and the Wisconsin FFA ambitions.
1. How would your FFA	Alumni Chapter use this grant fun	iding?
Click here to enter text.		

[&]quot;The Wisconsin FFA Alumni Association, Inc. strives to be Wisconsin's premier agriculture education advocate. We support the local FFA Alumni Chapters so they are better equipped to assist their local community, agriculture instructor(s) and agriculture youth."

grant funding.		
Click here to enter text.		
3. Please lay out and explain the	he budget for the project?	
Click here to enter text.		
4. What is your FFA Alumni Ch	apter's timeline for completing the project?	
Click here to enter text.		
Leartify that this EEA Alumni Chant	er meets the criteria for the Wisconsin FFA Alum	ni Support Grant and that
	Up Report no later than two months after the pr	
(Chapter President's Name - Print)	(Chapter President's Name - Signature)	(Date)

2. Please explain three goals/objectives that your FFA Alumni Chapter would like to accomplish with the

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