



# George H.W. Bush Vamos A Pescar™ Education Fund Grant Application

## Applicant Information

Organization Name:	
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Employer Identification Number (EIN):	
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Please attach a copy of your organization's 501(c)(3) determination letter (if appropriate).

Address:			
<i>Street Address</i>	<i>Suite/Unit #</i>		
<i>City</i>	<i>State</i>	<i>ZIP Code</i>	
Phone:	Website:		

Program Contact:	Title:
<i>First</i> <i>Last</i>	
Contact Address (if different from above):	
<i>Street Address</i>	<i>Suite/Unit #</i>
<i>City</i>	<i>State</i> <i>ZIP Code</i>
Phone:	Contact Email:

Executive Summary of Program to Receive Grant Funding	
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Executive Summary, Continued	
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Program Details			
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Activity #1 Title:		Proposed Date(s):	
Estimated Number of Participants:	Youth _____ Adults _____	Expected Duration (Hours):	_____

Activity #1 Description:
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Activity #2 Title:		Proposed Date(s):	
Estimated Number of Participants:	Youth _____ Adults _____	Expected Duration (Hours):	_____

Activity #2 Description:
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Activity #3 Title:		Proposed Date(s):	
Estimated Number of Participants:	Youth	Adults	Expected Duration (Hours):

Activity #3 Description:

Please continue adding activities on a separate page, if necessary.

**Demographics**

Ethnic Groups Served: Please detail your program’s expected participant demographics. Enter whole numbers only, total must equal 100%.

- African American
- American Indian
- Asian
- Caucasian
- Hispanic
- Multicultural
- Other \_\_\_\_\_

**Goals & Evaluation**

Please list three goals for your program:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Please provide evaluation plan details for evaluating the success in achieving these goals:

Please provide details regarding plans to follow-up with participants:

Budget	
<b>Requested Grant Amount (\$5,000 minimum):</b>	<b>TOTAL: \$</b>
Personnel	\$
Fringe Benefits	\$
Travel	\$
Equipment	\$
Supplies	\$
Contractual	\$
Construction	\$

Is this grant request part of a larger program?    **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

	Source	Amount
If Yes, please list other funding sources and amounts:	1.	\$
	2.	\$
	3.	\$
	4.	\$
	5.	\$

Greater Consideration Criteria	
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Please provide details regarding bilingual capabilities:	Will your materials be bilingual? <b>Yes</b> _____ <b>No</b> _____ Will the program staff be bilingual? <b>Yes</b> _____ <b>No</b> _____ Other information:
Please provide details regarding any plans to promote TakeMeFishing.org and VamosAPescar.org as resources for participants:	

Disclaimer and Signature
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*I certify that my answers are true and complete to the best of my knowledge.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_