

Recreational Trails Program Grant Request

Trail Based Education Grants (up to \$5,000)

Project Name:

Grant Amount requested:

A. Applicant Information:

Applicant:

Contact Person:

Address:

E-mail:

Telephone:

Fax:

Federal Employer Identification Number (FEIN):

B. Project Description: Provide details describing the project or program and how it will serve the purposes of the Recreational Trails Program. Include how this project relates to trail safety, trails-related environmental education, or trail-related environmental protection.

C. Resources. What makes your Institution particularly well suited to undertake the proposed project or program?

D. Personnel: Explain what personal will carry out the project or program and what percentage of their time will be dedicated to the project.

E. What is the timetable for this project?

F. What are the deliverables for this project?

G. Who is the target audience and how many people do you expect to reach?

H. How will you evaluate the success of the program?

I. Project Costs and funding			
Items not listed in the budget may not be eligible for reimbursement			
ITEM	GRANT FUNDS	MATCH FUNDS	TOTAL
Total			

Costs not eligible for reimbursement include: administrative or overhead costs, travel, equipment, refreshments, & staff training.

J. Project Assurances	
<p>By signature of its authorized representative below, the applicant certifies that if awarded a Recreational Trails Grant for this project, it will comply with the program requirements: 1) Diligently manage and execute the project to deliver the specified results within the project period and budget. 2) Operate and properly maintain all public-use facilities developed pursuant to the project. 3) Not discriminate in the availability and usage of any public facilities developed pursuant to the project.</p>	
_____	_____
Authorized Representative	Date

Print Name	