

Scarlet Sock Foundation

Print and mail to:
Scarlet Sock Foundation
PO Box 843
Northampton, MA 01061

Grant Application Form for Individuals

Name

Address

Email and phone

Project/Program Name

1. Describe the project/program and activities
2. What are your goals for participating in this project/program?
3. When does this project/program occur?

Costs:

Project/Program Fees

Transportation

Supplies

Total Amount Requested:

Expectations: Grant recipients will be asked to provide a short evaluation of the program upon completion. They will also be invited to present at the SSF annual event.