

Grant Application Information

The deadline for submitting student grant applications is Feb. 14 at 11:59 p.m. All rules and guidelines for completing grant applications can be viewed at <https://www.parkwayschools.net/grants>. Please review them before completing your application.

Students - get ready to tell us about your dream to learn! Write something that will inspire us and tell us why your dream is important to you.

Parkway Alumni Association sponsors Dream Grants (up to \$250) to help pay for extracurricular learning experiences and materials, or for free community resources, such as a job shadowing opportunity. Students are encouraged to submit requests that will help them expand their skills, gain knowledge or experience, or participate in school-related or community activities.

When completing this application, please remember the following:

- **USE YOUR OWN WORDS.** We like it when you explain things yourself! Please don't copy text from a brochure and don't use your parents' words.

- **BE INVISIBLE!** Your application can be disqualified if you write your name, address, names of your teachers and school staff, or the name of your school (and mascot) anywhere in Section I of this application.

- **WE WILL NOT GRANT YOU MONEY TO GIVE TO OTHER PEOPLE.** Your application must be for a learning experience that directly benefits you. It's okay if your learning experience teaches you to do something that helps others. For example, if your grant pays for a sewing class, you can give what you make to other people.

- If you are asking for a resource grant that **DOESN'T REQUIRE MONEY** (like a job shadowing opportunity), you can skip Questions 2-8.

- If you are applying for a **GRANT THAT WILL AWARD YOU MONEY** to help pay for your dream, you can skip Question 9.

- **YOU CAN SUBMIT MORE THAN ONE DREAM GRANT** application, but each one has to be for a different project or dream. You must complete a separate registration for each application.

- If you're a high school student who has submitted an application for a Phelps or Baker grant, you also may apply for a Dream Grant for the same project or dream. Why? If you are declined for a Phelps or Baker grant, you might be approved for a Dream Grant.

NOTE: If you close this window before finishing the application, you will lose the information. It might be a good idea to write your answers on paper or in a Word document first, then type/copy/paste them into this form.

GRANTING DREAMS



* Indicates required question

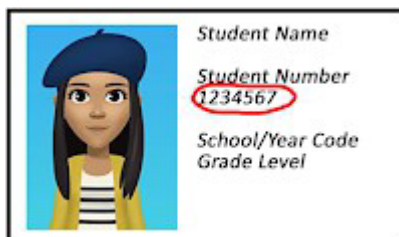
Student Information

1. Student's First Name *

2. Student's Last Name *

3. Street Address *

4. Parkway Student Number on Infinite Campus - this is a seven-digit number * (see diagram below) next to your student's photo in the Today window.



5. Student's Parkway email address *

6. School *

7. Grade *

8. Name of Parkway educator who knows student at school * - can be a teacher, coach, counselor or administrator

9. Parkway educator's email address *

10. Parent's or Guardian's Name *

11. Parent's or Guardian's Email (The application will be emailed to this address. * To include multiple email addresses, place a comma and no space between addresses)

12. Parent's or Guardian's Phone (please include cell number for text messages) *

Grant Information. Tell us about your dream.

Parkway Student Number on Infinite Campus * - this is a seven-digit number

Grade *

Title of your Application * (for example, Building an Ant Empire, Juggling My Way to Circus Flora, My Missouri Safari Adventure, etc.)

1) Tell us about your dream! What do you want to learn? Why is it a big deal to you? Please write a paragraph when describing your dream, not just a short answer. *

2) Does your dream experience have a TITLE? For example, most camps, classes and trips have a title (such as CODING FOR MINECRAFT). If there is no title, tell us what you need (such as TOOLS, BOOKS, FABRIC, etc.). *

3) Is your dream experience sponsored by an organization? For example, if you want to sign up for YMCA Swim Camp, the organization is the YMCA. If there is no sponsor, write "none." *

4) WHERE will your dream experience take place? *

5) WHEN will your dream experience take place? *

6) How much does your dream experience COST? *

7) Where will you PURCHASE your dream experience? Name the place/address on the internet or a geographic address where you can sign-up for your dream experience or buy the materials you'll need. *

8) Is there a deadline to PAY for it? *

9) If you're asking for a dream experience that DOES NOT cost money (it's free), tell us what you'd like to do. Maybe you're interested in meeting a professional or visiting a facility. *

10) Does your dream experience require any PREPARATION? For example, would you need to practice a skill, borrow tools or do any research? *

11) If we don't grant you all the money you need to pay for your dream experience, * how will you pay for the remainder? For example, if you need \$250 but we only grant you \$75, how will you get the remaining \$175 you would need? *

You are almost done!

Please review your application. Make sure you did not mention your name, your teacher's name, or the name of your school in your answers to the questions in Section 3.

✂✂✂ Mail or deliver the completed application form to:

Parkway Alumni Association
455 N Woods Mill Road
Chesterfield, MO 63017

OR

Return it to your teacher to submit.