

**WILL KENNY FOUNDATION  
STEM INNOVATION GRANT PROGRAM — APPLICATION FORM**

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**SECTION 1 — APPLICANT INFORMATION**

**1. Applicant Name**

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**2. Job Title / Role**

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**3. School Name**

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**4. School District**

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**5. School Address**

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**6. Applicant Email**

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**7. Applicant Phone Number**

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**8. Principal / Administrator Name**

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**9. Principal / Administrator Email**

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## SECTION 2 — PROJECT OVERVIEW

### 10. Project Title

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### 11. Grade Level(s) Served

☐ K–2

☐ 3–5

☐ 6–8

☐ 9–12

☐ Multiple grade levels (specify): \_\_\_\_\_

### 12. Number of Students Impacted

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### 13. Project Summary (2–4 sentences)

Provide a short, high-level description of your project.

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## SECTION 3 — PROJECT DETAILS

### 14. What STEM challenge, opportunity, or need inspired this project?

(Describe the classroom gap or opportunity you want to address.)

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### 15. Project Description

Explain what students will do, learn, build, explore, or create. Include specific activities, equipment, and intended outcomes.

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**16. How does this project support hands-on STEM learning?**

(Check all that apply.)

- ☐ Robotics
- ☐ Engineering/Design
- ☐ 3D Printing
- ☐ Coding / Computer Science
- ☐ Makerspace / Fabrication
- ☐ Science inquiry / experimentation
- ☐ Technology integration
- ☐ Other: \_\_\_\_\_

**17. Describe how this project supports equity, access, or inclusion in STEM (optional but encouraged).**

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**SECTION 4 — BUDGET & MATERIALS**

**18. Total Amount Requested**

Mini Grant (up to \$500) ☐

Innovation Grant (up to \$2,000) ☐

Amount: \$ \_\_\_\_\_

**19. Itemized Budget**

List all items you intend to purchase.

Item / Material	Vendor / Source	Quantity	Cost per Item	Total Cost
TOTAL				\$ _____

**20. If the project exceeds the grant amount, describe the additional funding source(s) (if applicable).**

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## SECTION 5 — IMPLEMENTATION PLAN

### 21. Project Timeline

- ☐ 4–6 weeks
- ☐ 6–12 weeks
- ☐ Semester
- ☐ Year-long

Provide details:

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### 22. How will you evaluate student learning or project success?

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### 23. Describe how materials will be maintained, stored, and used beyond this grant cycle.

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## SECTION 6 — SUPPORT DOCUMENTS

### 24. Principal/Administrator Letter of Support

- ☐ Attached
- ☐ Will be submitted separately

### 25. Optional Uploads

- ☐ Photos of classroom or existing equipment
- ☐ Links to curriculum standards
- ☐ Student feedback / inspiration samples
- ☐ Quotes from vendors
- ☐ Other supporting materials

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## SECTION 7 — CERTIFICATIONS

By submitting this application, I certify that:

- All information provided is accurate.
- Funds will be used strictly for STEM-related educational purposes.
- I will provide mid-year and final reports, including photos or summaries of student work.
- Purchased items will remain at the school for ongoing student use.

**Applicant Signature**

\_\_\_\_\_ **Date:** \_\_\_\_\_

**Principal/Administrator Signature**

\_\_\_\_\_ **Date:** \_\_\_\_\_

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**Submit Completed Application To:**



**[grants@willkennyfoundation.org](mailto:grants@willkennyfoundation.org)**