



2017 Made for Shade Application

Section A: List Primary contact(s) and or person responsible for the implementation.

Applicant(s)

Name	School	Organization
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Location

Email	Phone
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ED Program

Shade Structure

Tree Planting

Other

Section B:

1. Please describe your shade project. In addition, list the objectives and outcomes.

2. Please attach a drawing or plan of your shade project (for tree planting and structures only)
Please use lines below for any explanations.

3. How will you measure this projects success?

Section C:

Population Impacted _____ Number of Staff _____ Number of Students _____

Section D: Please indicate the cost of project including design, materials and installation.

Prices of proposed shade structure: First Choice _____ Second Choice _____

Section E:

Please identify any additional funding for this project, received or pending. (ex. funds from PTO)

Section F:

Education of Sun Protection:

We will provide one student assembly in conjunction with your school in the Spring 2018.

Applicants Signature(s)

Signature Date

Name Printed

Applications must be postmarked no later than June 1, 2017

Made for Shade Foundation
% RCMC -Rhonda Reuwsaat
2820 Mt. Rushmore Rd
Rapid City, SD 57701

For Grant Committee Only:

Date Received _____ Subject Area _____ Approved _____
Date Reviewed _____ Grade Level _____ Denied _____