# Appendix C

**Cover Page - 1**

|  |  |
| --- | --- |
| **Organization or Entity Name** |  |
| **Contact Person Name** |  |
| **Address, Line 1** |  |
| **Address, Line 2 if applicable** |  |
| **City/Town/State/Zip Code** |  |
| **Org. Website Address** |  |
| **Contact Phone Number** |  |
| **Contact E-mail** |  |

| **Type of Eligible Provider. Please choose the appropriate box.** |
| --- |
| Local Educational Agency |
| Community Based Organization |
| Volunteer Literacy Organization |
| Institution of Higher Education |
| Public or Private Nonprofit Agency |
| Library |
| Public Housing Authority |
| Nonprofit Organization, not described above, that has the ability to provide literacy services to adults and families |
| Consortium of agencies, organizations, institutions, libraries, or authorities described above  Other: (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Annual Grant Amount Requested for July 1, 2020-June 30, 2021 (FY21):** $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Amount requested cannot exceed county distribution amounts for proposed counties checked below)

**Choose the county or counties the applicant proposes to serve:**

Addison

Bennington

Caledonia

Chittenden

Essex

Franklin

Grand Isle

Lamoille

Orange

Orleans

Rutland

Washington

Windham

Windsor

# Appendix C

**Cover Page - 2**

**Each applicant MUST apply to provide the following Adult Education and Literacy activities:**

🗸 Adult education

🗸 English language acquisition (ELA/ESL) activities

🗸 Workforce preparation activities

🗸 Integrated Education and Training (IET)

**Choose any additional activities for which the applicant is seeking funding:**

Workplace adult education and literacy activities

Family literacy activities

Integrated English literacy and civics education (IELCE)

What entity will be the fiscal agent for this grant (if different from above)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fiscal Agent Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Who was the lead grant writer for this application and what is their professional title?

Name/Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_