



ESP GRANT FUNDING REQUEST FORM

To Apply for Funds:

Complete the application and FAX 360-733-3952 or mail it to the WEA Fourth Corner office. Requests for funds should be made sixty (60) days in advance of the event whenever possible. Contact the council office if you need further information or have questions or ideas, 1-800-300-0796 or 360-733-3344.

Association: _____ President or Contact: _____
 Address: _____ Email: _____
 Phone: (Work) _____ (Home) _____ (Cell) _____

Purpose of request (be specific):

Total Cost of Training: \$ _____
 WEA Fourth Corner Responsibility: \$ _____
 Local Association Responsibility: \$ _____
 Hardship Funding*** \$ _____

Mileage	\$
Lodging	\$
Meals	\$
Other(Explain)	\$
Other(Explain)	\$

(Include in Total Cost Line)

ASSOCIATION PRESIDENT SIGNATURE: _____ DATED: _____

INSTRUCTIONS & RATIOS

1. Grant proposals must be submitted to the WEA Fourth Corner Council President.
2. The grant proposal must be for program(s) directly related to the [Goals and Objectives of the Council](#).
3. Consideration will be given for innovative approaches for improving the welfare of the membership
4. The maximum provided will be determined on a request by request basis. All funding will be on a shared cost basis.

*****Hardship funding:**

Briefly describe the circumstances which would preclude your local association from providing the needed matching funds for the requested activity, as well as any other information you believe would further your cause for approval of this exemption.

Formula #	Ratio	Local	4th Corner
A	1:1.5	40%	60%
B	1:2	33%	67%
C	1:4	20%	80%

- A. Locals larger than 100 members will receive \$1.50 for every local dollar spent.
- B. Locals with 50 members, but fewer than 100 will receive \$2.00 for every local dollar spent.
- C. Locals with 50 or fewer members will receive \$4.00 for every local dollar spent.

1800 James Street, #201, Bellingham, WA 98225-4623
 Toll Free 1-800-300-0796 or locally (360)-733-3344 Fax (360)-733-3952
www.weafourthcorner.org