

**Attachment A: Application for UPA Grants to Chapters**

**Section 1: General Information**

**Amount requested:** \$ \_\_\_\_\_

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

**Chapter Name:** \_\_\_\_\_

**Chapter President:**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**Work Phone Number:** \_\_\_\_\_

**Home Phone Number:** \_\_\_\_\_

**Fax Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

***Statement of Purpose***

Outline below the purpose(s) for which this grant will be used. Include a preliminary financial statement for the project, showing planned expenditures and estimated income (if it is a revenue-generating activity). Be sure to specify the completion date and include any other pertinent information. Attach a separate sheet if necessary.

***Statement of Benefit***

State below how you believe your chapter and the Association will benefit from the proposed project. Attach a separate sheet if necessary.

**Activity Leader**

Give the name, address, and telephone number of the person who will be responsible for the activity.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Work Phone Number: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

I certify that all information provided in this application is true, accurate, and current to the best of my knowledge, and that any resulting grant will be used only for the purpose stated herein. I agree that the \_\_\_\_\_ chapter will present to the Association, within one year of receipt of funding, a complete report regarding the disposition and effects of said grant.

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

By: \_\_\_\_\_

(Chapter President/Coordinating Chapter President)