

FRIENDS OF RAINIER EXPERIENCE ENHANCEMENT GRANT APPLICATION

F.R.E.E. Grants are awarded to employees of Rainier School for the purpose of enhancing resident experiences and activities.

Name _____ Work Phone _____

Date _____

Position/Role _____

House/PAT _____

Requested Grant Amount _____

Number of Residents _____

Describe how this grant will be used to enhance resident experiences and activities:

(If you need more space, use back of application or attach a sheet of paper.)

What do you plan to purchase with this grant? Please itemize expenses.

Project Start Date _____ Project Finish Date _____

Upon application approval by the FOR Board, a check for the grant amount will be made payable to the applicant. Receipts must be submitted to the FOR Board within two weeks of project completion. In some cases, the FOR Board may require that invoices be submitted so that checks can be made out directly to a vendor.

I am aware of and support this application:

_____ Date _____

Signature of House Manager or Supervisor Print Name

Three ways to submit application: 1) Mail to- Friends of Rainier, P.O. Box 516, Medina, WA 98039-0516
2) Fax to Friends of Rainier President Jeff Carter at 425 968-9521 3) Scan and email to Friends of Rainier through Lvonwalter@comcast.net