



Lincoln Education Association Foundation

CERTIFICATED PROFESSIONAL GRANT APPLICATION

Name: _____ School: _____

Address: _____ Home Phone: _____

Position or Assignment: _____

Total Years in LPS: _____ Are you currently an LEA Member? _____ How long? _____

1. Do you intend to return to Lincoln Public Schools next year? _____

If no, please explain _____

2. List any previous grants received: _____

3. When do you plan to implement your project? _____

Include a typed 250-word or less statement of intent on how you plan to use this grant by describing its innovative use and how this grant will help your students.

Signature of Applicant
(for on-line applications, receipt sufficient)

Date

APPLICATION DEADLINE: April 15

Applications may be obtained and completed on the LEA website at
www.lincolneducationassociation.org
click on LEA Foundation

The completed application may also be sent to:
LEAF Certificated Professional Grant Committee, 4920 Normal Blvd., Lincoln, NE 68506
or through School Mail, LEAF Certificated Professional Grant Committee, LEA Office (no address or box # needed)
or e-mail emily.mills@nsea.org