

**Otsego Public Schools Foundation**  
**Fund-A-Need**  
*Grant Proposal*

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**Contact information**

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

Title: \_\_\_\_\_

School: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Grant Information**

Grant Title: \_\_\_\_\_

Amount Requested: \_\_\_\_\_

Deadline to receive funds: \_\_\_\_\_

Description: \_\_\_\_\_

How will this improve student learning and enhance your classroom?

What long term benefits will this give your students?

Budget Details:

You can save and Email the  
completed form (as an attachment)  
to:  
opsf\_86@hotmail.com.