



**LAURENT CLERC CULTURAL FUND**  
*For the Cultural Advancement of the Deaf Community*

**APPLICATION FOR GRANT**

For LCCF USE ONLY	
Grant status	Date
<input type="checkbox"/> Received	_____
<input type="checkbox"/> Approved	_____
<input type="checkbox"/> Not approved	_____

Please use this form when applying for a grant from the **Laurent Clerc Cultural Fund**. The completed form and attachments should be sent to the Chairperson, **Laurent Clerc Cultural Fund Committee**, Peikoff Alumni House, Gallaudet University, 800 Florida Avenue, N.E., Washington, D.C. 20002-3695. Telephone: (202) 651-5061 (TTY); (202) 651-5060 (V); (202) 651-5062 (FAX); E-mail: alumni.relations@gallaudet.edu

*Please print or type all answers. Illegible forms will be returned without consideration. Use additional paper if necessary.*

Name of Applicant: \_\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

City, State, Zip Code: \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ V/TTY/Both (Work)

\_\_\_\_\_ V/TTY/Both

FAX: (Home) \_\_\_\_\_ (Work)

\_\_\_\_\_

E-Mail: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

1. Name of project:

2. Detailed description of the project:

3. Amount of grant requested: \_\_\_\_\_ (Attach a total budget statement outlining how the funds will be spent.)

4. Starting date: \_\_\_\_\_ Estimated date of completion: \_\_\_\_\_

5. Explain in detail how this proposed project will contribute to the cultural advancement of deaf people.

6. Is additional funding required for this project? \_\_\_\_\_ Yes \_\_\_\_\_ No

a. If **Yes**, have you obtained the additional funding? \_\_\_\_\_ Yes \_\_\_\_\_ No

b. If **Yes**, describe source and amount of funding:

7. Explain your qualifications for undertaking this project. Attach a copy of your resume and at least three letters of reference and/or recommendation. Please include address, telephone number, and e-mail address of each reference.

8. If other individuals will be participating with you in this proposed project, give their names and affiliations and explain their qualifications.

9. If equipment will be purchased for the purpose of the proposed project, explain what they are, how you will obtain them, and what will become of them when the project is completed.

Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

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