



**California's Continuing  
Arbor Week Celebration  
Stipend Application**



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

**Project Manager Name:** \_\_\_\_\_

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

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

**City:** \_\_\_\_\_ **Zip** \_\_\_\_\_

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

**Telephone Number: Office:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Stipend Amount Requested (check one only):**     \$1,000                       \$1,500                       \$2,000

**Number of Events:** \_\_\_\_\_ **Dates of Events\*:** \_\_\_\_\_

**Number of trees to be planted:** \_\_\_\_\_ **Number of trees to be cared for/stewarded:** \_\_\_\_\_

**Number of schoolchildren to be engaged overall:** \_\_\_\_\_ **Number of schools to be engaged:** \_\_\_\_\_

**Local Elected Official(s) to be invited:** \_\_\_\_\_

**Name of Local Community Newspaper(s) to be contacted:** \_\_\_\_\_

**Summary of the Event Activities and how the stipend will be used** *(1,275 character limit):*

**Application Deadline: October 15, 2018**

**Email Application PDF to: Chuck Mills ([cmills@CaliforniaReLeaf.org](mailto:cmills@CaliforniaReLeaf.org))**

**Questions: Call Chuck at 916.497.0035 or Cindy at 916.497.0034**