



# California Arbor Week 2019 Grant Application



Organization Name: \_\_\_\_\_ City: \_\_\_\_\_ Zip \_\_\_\_\_

Local Utility Provider (from logos above – see attached maps) \_\_\_\_\_

Project Manager Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

Email: \_\_\_\_\_ Tel#: Ofc: \_\_\_\_\_ Cell: \_\_\_\_\_

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

Event Schedule: (check one only)  Spring (Mar 1-May 30) OR  Fall (Sept 1-Oct 30)

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: February 22, 2019 -- Email Application PDF to: Cindy Blain

([cblain@CaliforniaReLeaf.org](mailto:cblain@CaliforniaReLeaf.org)) Questions: Call Cindy at 916.497.0034 or Chuck at 916.497.0035