Grant Program
Grant Year (GY) 2024-2025
Grant Application

Please complete the requested information and submit by email to grants@ncta-testing.org by Friday, March 15, 2024. Please refer to https://ncta.memberclicks.net/grants-program for copy of the Terms and Conditions Agreement and additional information on the NCTA Grant Program.

*NOTE: Grant recipients (Individuals, institutions, agencies, associations, or other groups) are eligible to apply for subsequent awards no less than three (3) years after a previous award.

Part I: Grant Applicant Information:

Applicant Name and Title:	
E-Mail Address:	
Organization/Office Name:	
Complete Mailing Address:	
Office Phone:	
Supervisor Name and Title:	

Part 1B: Co-Applicant/Alternate Contact Information:

Co-Applicant Name and Title:	
E-Mail Address:	
Organization/Office Name:	
Complete Mailing Address:	
Office Phone:	
Supervisor Name and Title:	

Part II: Institution Information

Institution Name:	
Primary Contact:	
Business Mailing Address:	
E-Mail Address:	
Office Phone:	

Part III: Institution's Grant/Sponsored Programs Office Information

Primary Contact Name and Title:	
E-Mail Address:	
Office Name:	
Business Mailing Address:	
Office Phone:	
Email Address:	
Institution's Letter of Support Attached:	☐ Yes ☐ No

Part IV: Project Information

Grant Type: (Select One)	☐ Professional Development: Funds are available for one (1) year ☐ Research Grant: Funds are available for two (2) years
Project Title:	
Total Amount Requested: (Attach Budget/Estimates for this Project)	
Intended project participants:	
Project Summary:	
Project Purpose and Goals:	
Proposed Activities:	
Describe any issues that could negatively impact the project's outcome:	
Describe how the project outcomes will be evaluated:	

Signature

By signing below, I acknowledge that the information provided above complies with NCTA Grant Program's guidelines outlined on the Grants Program webpage at https://ncta.memberclicks.net/grants-program.

Signature:		Date:	