

[GRANT NAME]

INTEREST TO APPLY FORM

All eligible applicants are **required** to submit this form.
Please fax this form to the Office of Grants Management by **Date**
Attention: Cheryl Bostick, Manager
Office of Grants Management
Richmond Public Schools
Telephone: (804) 780-7791 Fax: (804) 780-5235

Please check one:

Yes, we are interested. **No**, we are not interested.

If yes, how can the Grants Management Staff assist you?

- 1. Reviewing/editing proposal drafts for submission
- 2. Assisting you and/or team with proposal writing
- 3. Reviewing the grant application to begin the proposal development process

School:
Principal Name:
Contact Name:
E-mail address:
Phone Number:
Fax Number:
Principal Signature:

For Grants Management Office Purposes Only

Date Received _____