SWE–Region H Section Vitality Grant (SVG) Application

Fill out this form and return it to the region treasurer regionH.treasurer@swe.org by the deadline stated in the policy (August 31 for professional sections, September 30 for collegiate sections, or January 31).

|  |  |
| --- | --- |
| SWE Section |  |
| $ Amt Seeking |  | Date applied |  |
| Contact Person’s Information |
| Name |  | Member # |  |
| 🖃 Address |  |
| Phone # |  |
| Email |  |

Does your section have at least 10 paid members? [ ]  Yes [ ]  No

Were your previous reports submitted on time? [ ]  Yes [ ]  No

|  |
| --- |
| What area of improvement have you identified during the final section report and/or vitality assessment process? |
|  |

|  |
| --- |
| What are you proposing to do with the funds? |
|  |

|  |
| --- |
| How will this activity help with your area of improvement? |
|  |

|  |
| --- |
| Please attach or paste a budget and timeline/schedule for this program: |

|  |
| --- |
| *THIS SECTION FOR REGION TREASURER USE ONLY* |
| *Amount awarded:* |  | *Date notified* |  |
| *Comments / Stipulations* |  |

FINAL REPORT

(to be added by the section after program is complete)

|  |
| --- |
| Summary paragraph, describe the impact of the program: |
|  |

|  |
| --- |
| Summary final budget, where were the funds spent: |
|  |

|  |
| --- |
| Funds remaining, if any, to be returned to the region: |
|  |