

OUR MISSION LITERACY GRANT PROGRAM YOU CAN HELP LEARN TO READ

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Overview

* indicates required field

*** Project Title** Please enter the project title.*** Requested Cash Amount** Please enter the amount you are requesting from the Dollar General Literacy Foundation for this project (\$15,000 maximum).*** Number of individuals served by funding from this Adult Literacy application** Please provide the number of individuals served by the grant funds requested. Please do not use percentages.

ABE

ESL

GED or high school equivalency

660.00 Total

*** Projected Ethnicity Served** Please provide numbers, not percentages.
The total projected ethnicity served should equal the number served from the question above.

African American

Asian/Pacific Islander

Caucasian

Hispanic

Native American

Multi-Racial

660.00 Total

*** Has your organization received previous funding from the Dollar General Literacy Foundation?****If Yes, what was the grant amount and when did you receive it?**

(500 character maximum)

*** Is this a new project?** Is this the first year of the project that you are requesting funding for?**If it is not the first year for this project, then how many individuals were served by this Adult Literacy project last year?**

ABE

ESL

GED or high school equivalency

0.00 Total

*** What is your National Literacy Directory Program ID number?** Please enter the National Directory Program ID number associated with your organization. To add your organization or locate this number visit the National Literacy Directory at www.nationalliteracydirectory.org.*Incomplete*

Save and Proceed

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