



GFWC-Mississippi Federation of Women's Clubs, Inc.



GFWC-MFWC Challenge Grant Application (Must be submitted by February 1st)

Application Instructions:

1. Applicant must submit a letter of recommendation from a school official and one from a member of the GFWC-MFWC sponsoring club. Attach additional pages as necessary.
2. Completed form must be emailed to the Cherry Moon, GFWC-MFWC Challenge Grant Chair at cherrymoon@comcast.net and Dr. Carolyn S. Tedford, GFWC-MFWC President, at carolyntedford@outlook.com by **February 1st** of each year.
3. Questions concerning Challenge Grant Application process should contact Cherry Moon, GFWC-MFWC Challenge Grant Chair at cherrymoon@comcast.net.



*GFWC-Mississippi Federation of
Women's Clubs, Inc.*



GFWC-MFWC Challenge Grant Application

2025

(Must be emailed by February 1st)

Applicant Information:

Name: _____

Mailing Address: _____

Telephone Number: _____ (Home/Cell) _____ (Work)

Email Address: _____

Sponsoring GFWC-MFWC Club: _____

Employment Information:

Name Of School Where Employed: _____

Mailing Address: _____

Immediate Supervisor Name & Title: _____

Years Employed At This Institution: _____ Total Years of Teaching Experience: _____

1. Please describe in detail your proposal for the use of grant funds and the dollar amount needed.

2. Please estimate the number of students with learning disabilities who will benefit from this program and describe how this grant will improve the time they spend in your classroom.



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Applicant Information:

Name:

Are funds for this proposal available to you from any other source? Please explain your answer below.

4. Have you received this grant before?

Yes

No