

TAHPERD GRANT PROGRAM

Application

Name: _____

Date: _____

Institution/Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Email: _____

Are you a current TAHPERD member? Yes No

TAHPERD Grant Program Project Information Form

1.) Write a brief description of the core aspects of the proposal.

