UW Center for Agricultural Safety and Health

2021County Farm Safety Grant Application

**County/Counties:**

**Title of Lead Group:**

**Contact Person:**

**Address:**

**Phone Number:**

**E-mail:**

**Title of Program:**

**Total Amount Requested:**

**Please check** that the required proposal items are attached to this application cover page.

* Statement of Need
* Objectives of Program
* Major Activities
* Timeline
* Key Organizations, Representatives and Responsibilities
* Evaluation
* Budget Explanation
* Budget Form
* IRS W-9 Form

This acknowledges that we agree to all terms set forth in the 2021 County Farm Safety Grant Guidelines by the University of Wisconsin Center for Agricultural Safety and Health.

Applicant Contact Person’s Signature Date

**Please email a digital copy with signature to:**

Cheryl Skjolaas at skjolaas@wisc.edu

UW Center for Agricultural Safety and Health

**Due March April 30, 2021**

UW Center for Agricultural Safety and Health

2021 County Farm Safety Grant Budget Form

**County/Counties:**

**Checks will be made payable to organization identified on IRS W-9 Form.**

|  |  |  |
| --- | --- | --- |
| **Budget Items** | **Grant Amount** | **County Matching Funds** |
| **Program Matching** | **In-Kind Matching** |
| **Educational Resources**(e.g., videotapes, curriculum materials)**Supplies and Small Equipment Items**(e.g., cones for tractor driving courses)**Consumable Supplies**  (e.g., handouts, paper, printing costs) **(Note: Food is not allowable)****Other** |  |  |  |
| **TOTAL** |  |  |  |