

Explain how participants will be involved in the project:

Describe the benefit of the project to participants and others:

Describe how you will measure the success of your project:

Budget (Please list project expenses in detail):

Total Amount Requested:

Teacher Signature _____ Date: _____

Principal Signature _____ Date: _____

Mail, e-mail, deliver, or fax your completed application to:

**Rockwood Water P.U.D.
Attn: Chris Shaw
19601 NE Halsey
Portland OR 97230
Fax: (503) 667- 5108
csdaw@rwpud.org**

***Application forms in Microsoft Word or PDF format can be downloaded at:**

www.rwpud.org/education