



Children's Fund of School Psychology, Inc.

Basic Needs/Mental Health Grants Application Form

Revised, July 2016

Name _____

Address _____

E-mail address _____ Phone number _____

School district _____

Practicing school psychologist?* _____ Yes _____ No

Retired school psychologist?* _____ Yes _____ No

School psychology intern?* _____ Yes _____ No

Current member of the Children's Fund of School Psychology, Inc.? *
_____ Yes _____ No

Type of Grant Requested: Basic Needs ** _____ Mental Health** _____

Number of children/youth expected to be served by this grant _____

* An applicant for a Basic Needs or Mental Health Grant must be a current member of the Children's Fund of School Psychology, Inc., a practicing school psychologist, retired school psychologist, or school psychology intern.

Membership dues are used to help fund future grants from the Children's Fund of School Psychology, Inc.

Description of Needs (please include a description of the population to be served by either grant):

An application for a Basic Needs Grant should include the types of items that are being requested. An applicant for a Mental Health Grant should provide an itemized list of the specific materials that are being requested.