

COMMUNITY SCHOOL SUBSIDY APPLICATION

GENERAL INFORMATION

Name of School: _____

Mailing Address: _____ City: _____ Prov: ____ Postal Code: _____

Phone #: _____ Fax #: _____ Email: _____

Contact Person(s): _____ Position: _____

SCHOOL PROGRAM INFORMATION

How many students will participate: _____ Grade(s) of the class(es) attending: _____

How many school staff will be involved in your program? _____ How many parents: _____

Briefly explain the nature of your Shekinah-based school event:

What do you hope to achieve by bringing students to Shekinah?

Other than Shekinah-specific programming, what other school initiated activities will be included? (i.e. journaling, photography, science, art, etc.)

How do you typically fund this type of program? (i.e. fundraising events, school fees, etc.)

*PLEASE NOTE: The amount of subsidy and the number of subsidies given is dependent upon the number of community schools applying and the amount of funds available. **Maximum subsidy of \$250/school/year.***

Applications need to be received by Shekinah Retreat Centre before the end of the prior program season, as follows:

FALL SEASON (September and October): by June 20

WINTER SEASON (January and February): by October 31

SPRING SEASON (May and June): by February 28

I ACKNOWLEDGE that by completing and submitting a Community School Subsidy Application it is not guaranteed that the school will receive a subsidy.

Signature of Contact Person: _____ Date: _____