



2026-2027
Circle of Grace Grant Application Supporting Documents
President and Principal Services Approval Form

Primary Grant Applicant _____

Title of Grant Project _____

Department:

- Religion/Campus Ministry
- Leadership Development and Service Learning
- School Counseling
- Special Education
- Gifted Education
- English Language Arts
- Mathematics
- Science
- Social Studies
- World Language
- Fine Arts - music or visual arts
- Technology - technology and engineering or computer science
- Business
- Health or Physical Education
- Other (please specify) _____

By completing this form, I agree this project aligns to the mission of Elyria Catholic and the Circle of Grace.

Applicant Signature _____ Date: _____

Principal Signature: _____ Date: _____

President Signature: _____ Date: _____

Please upload completed form per instructions provided in the Grant Application.