



# 2017 DAYS OF CARING School & Agency Project Application



Please indicate which community your Project Application takes place. Make additional copies for individual community projects.

- |   |  |
|---|--|
| _____ Sept 8 <sup>th</sup> – Ft Walton Beach                | _____ Sept 14 <sup>th</sup> – Crestview    |
| _____ Sept 12 <sup>th</sup> – DeFuniak Springs/North Walton | _____ Sept 15 <sup>th</sup> – Destin       |
| _____ Sept 13 <sup>th</sup> – Niceville/Valparaiso          | _____ Sept 15 <sup>th</sup> – South Walton |

**FAX BACK TO THE UNITED WAY OFFICE at 243-6625 NO LATER THAN Tuesday, August 8, 2017**

**Agency/School Name:** \_\_\_\_\_

**Project Site address:** \_\_\_\_\_

**Coordinator:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Phone & Fax Number:** \_\_\_\_\_

**Project Description:** (Please be as specific as possible) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Volunteers Needed:** \_\_\_\_\_

**Skills Required:** \_\_\_\_\_

\_\_\_\_\_

**Equipment/Materials Needed:** (Your agency **MUST** be able to provide/obtain all materials for volunteers and projects)

\_\_\_\_\_

\_\_\_\_\_

**Additional:** Water, snacks, pictures on CD

\_\_\_\_\_

<b>Can you complete your Project in 1/2 day?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>All pre-work is required by agency.</b>
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**How do you plan to recognize the participating volunteers?** (Ex. Certificates, recognition on your website or newsletter).

\_\_\_\_\_

\_\_\_\_\_ **My agency would like volunteers to work with one OR more of our clients.**

**Please explain project:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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