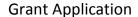


AMERICAN ASSOCIATION OF ZOO KEEPERS

Trees for You and Me **Restoration Grant**





FOLLOW INSTRUCTIONS CAREFULLY – COMPLETE ALL 3 PAGES OF THE APPLICATION

All Applicants **must** submit with this completed application:

curriculum vitae (3 pages maximum); 2 letters of recommendation (with at least 1 from the Executive Director of your facility/affiliated organization)

SUBMIT COMPLETED APPLICATION AND SUPPLEMENTAL DOCUMENTATION TO:

With a copy to: Electronic (preferred) OR Mail Dawn Fleuchaus, Grant Coordinator Ed Hansen Ed Hansen Trees for You and Me Program CEO/CFO ATTN: TFYM Grant TFYM@AAZK.org Ed.Hansen@AAZK.org 8476 E. Speedway Blvd., Ste. 204 ATTN: TFYM Grant ATTN: TFYM Grant Tucson, AZ 85710-1728 PRINCIPAL APPLICANT INFORMATION NAME **EMAIL TELEPHONE POSITION TITLE FACILITY** OTHER AFFILIATE ORGANIZATION TAX IDENTIFICATION NUMBER OR REGISTERED CHARITY NUMBER FACILITY OR ORGANIZATION ADDRESS FOR DISBURSEMENT OF FUNDS **STUDENT** AAZK MEMBER **CONSERVATION PARTNER** YES NO YES NO YES NO **ADDITIONAL INVESTIGATORS** NAME **TITLE INSTITUTION EMAIL** TO BE COMPLETED BY FACILITY/AFFILIATE ORGANIZATION DIRECTOR I endorse the project described herein to be conducted at, or in conjunction with, the organization listed above. DATE FACILITY DIRECTOR'S SIGNATURE



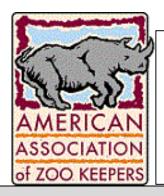
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Trees for You and Me Restoration Grant





APPLICANT PROJECT	
TITLE OF PROPOSAL	
PROJECT DATES FROM	то
AMOUNT REQUESTED	I WILL ACCEPT PARTIAL FUNDING
	YES NO
Briefly define the objectives of the grant proposal	



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Trees for You and Me Restoration Grant





APPLICANT PROJECT (CONT.)	
Summarize your project's sustainability goals and potential	
Detail how grant funding will be applied to the proposal	
Describe how the grant award will be published and shared outside of your organization	
Describe project alterations in the case of partial funding	
I have read the TFYM Grant Submission Guidelines and understand that failure to comply with the	
Guidelines may result in revocation of the AAZK TFYM Grant.	
Guidennes may result in revocation of the AAZN IT TIVI Grant.	
PRINCIPAL INVESTIGATOR SIGNATURE DATE	
I MINOR AL INVESTIGATOR SIGNATORE DATE	