MAPs Grants Professionals Learning Group Application

Applicants must be alumni of the MAPS Basic Grant Training. The application process is intended to help MAPs Grants Professionals create a group that ensures the best possible outcome for all involved. Group size is limited to six participants. Please complete this application and return to Aly Evans ([alykevans@yahoo.com](mailto:alykevans@yahoo.com)) **no later than the date stated on the website.**

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| --- | --- | --- | --- | --- | --- |
| Name: |  | | | | |
| Email : |  | | | | |
| Phone: |  | | | | |
| Company | |  | | | |
| E3 (MAPs) Training Attended: | | | | |  |
| Training Location: | | |  | | |
| Dates of training attended: | | | |  | |

Please check if you agree to the following terms:

* I will be able attend all four sessions.
* I will bring a real grant application to work on during the four weeks

Grant RFP title and due date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OR

* I will bring a project in process of development to work on during the four weeks

Project Title and short description \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* I understand that as a member of the MAPs Professional Learning Group I will be an active participant, respect the other members, come prepared to learn, ask for help, share knowledge and experience, and practice active listening, self responsibility, and acceptance of others.

Questions about the Professional Learning Group? Email us and we will be happy to discuss it with you. [MapsGrantPros@gmail.com](mailto:MapsGrantPros@gmail.com)