



APPLICATION FOR ADULT EDUCATION PROGRAM FUNDING
NORTH DAKOTA DEPARTMENT OF PUBLIC INSTRUCTION
 Division of Adult Education and Literacy

Program Application
North Dakota Adult Education and Family Literacy Programs

Program Year 2016-2017

PART A - Face Page

Applicant		CHECK ONE: <input type="checkbox"/> New Project <input type="checkbox"/> Continuing Project
Project Director		
Project Title		CHECK ONE: <input type="checkbox"/> K-12 District <input type="checkbox"/> Voc. Ed. Center <input type="checkbox"/> Community College <input type="checkbox"/> Other _____
Address		
City/State/Zip		
ALC Director Number	Fax Number	
ALC Director E-mail		

Type of Application (please check all that apply):

- | | |
|---|------------------------------------|
| <input type="checkbox"/> Adult Education | <input type="checkbox"/> Summer |
| <input type="checkbox"/> English Language Learner (ELL) | <input type="checkbox"/> Satellite |
| <input type="checkbox"/> Displaced Homemaker | |

Amount of Funds Allocated:	\$
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Signature of Authorized Representative	Date
Printed Name of Authorized Representative	

For Department of Public Instruction Use Only	
Project Number AE16- _____	Date Received