



## Grant Application

*Kate's Voice thanks you in advance for your grant submission. Please feel free to contact us at [katesvoice@comcast.net](mailto:katesvoice@comcast.net) or 978-440-9913 if you have any questions.*

*There are two parts to the grant application:*

- 1. Grant Application Questions*
- 2. Required Addenda to the Application*

### **Grant Application Questions**

Please note this application is for teachers/classes who have previously received a Kate's Voice Music Therapy Grant.

#### **Teacher and School Information**

1. Please provide the following information

a. **Name/Title:** \_\_\_\_\_

b. **Address:** \_\_\_\_\_  
\_\_\_\_\_

c. **Phone & E-mail:** \_\_\_\_\_

2. Are you the **primary contact person** for this grant? If not, please provide the following information of an additional contact.

a. **Name/Title:** \_\_\_\_\_

b. **Address:** \_\_\_\_\_  
\_\_\_\_\_

c. **Phone & E-mail:** \_\_\_\_\_



**Class Information**

1. Please provide an overall description of the special needs of the children in your class.

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2. How many students are in your class (approximately)? \_\_\_\_\_

3. What are the ages and grade/s of the students? \_\_\_\_\_

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4. Do your students currently have access to music or music therapy?

\_\_\_ **Yes** \_\_\_ **No**

If yes, please explain.

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5. Do you currently receive any funding for music?  **Yes**  **No**
6. What size grant are you applying for (the minimum grant is \$200.00 and the maximum is \$2,200.). Please note that the grant amount you apply for does not affect your chances of selection.  
\_\_\_\_\_
7. From time to time, Kate's Voice asks teachers to take photos or video of students enjoying the music sessions. Kate's Voice uses photos and video occasionally on our website and/or for fundraising purposes. Would you be willing to take and/or let a Kate's Voice representative take photos/video of music therapy sessions? Kate's Voice will supply your class with an appropriate waiver.  
 **Yes**  **No**

**Using Music in Your Class**

1. How would you integrate music classes into your curriculum?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Do you have ample space in the classroom or the school for a musician to perform and children to participate in class?  **Yes**  **No**



3. Are you currently applying for any other music-related grants? \_\_\_ **Yes** \_\_\_ **No**

4. In a paragraph, please thoughtfully tell us why music therapy would benefit your students?

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**Previous Music Therapy Experience**

1. How were you able to measure the success of the music therapy?

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2. How many students are new to the classroom since the last Kate's Voice Music Therapy Grant? How many students are returning?

**New Students:** \_\_\_\_\_



**Returning Students:** \_\_\_\_\_

3. How did you work the music therapy into the curriculum?

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4. Would you approach or integrate the music therapy sessions any differently since the last sessions?

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## **Required Addenda to the Grant Application**

1. Please provide a mini-budget breakdown of how you will use the grant money.
2. Please attach a description or resume of the music therapy musician you intend to use. If you do not have a music therapist, please contact us at Kate's Voice for names of therapists.