

**CONCORDIA PSO HS SERVICE GRANT PROGRAM
APPLICATION FORM 2021-2022**

The PSO HS Service Grant program is available to encourage HS students to actively lead projects which serve the community. Please refer to the PSO HS Service Grant instructions for the details, required approvals and deadlines.

1. Nature of the team initiating the project:
 - ☐ Recognized Club Name _____
 - ☐ Class Name _____
 - ☐ Group Project(3 or more students) Names _____
2. Name of student contact submitting application _____
3. Student email address: _____
4. Name of Service Project Teacher or Advisor _____
5. Teacher or Advisor email address _____
6. Type of Grant requested
 - ☐ Seed Money Grant – funds are used for supplies for a service project, up to 1000RMB
 - ☐ Sustainable Development Grant – funds used for items necessary for service project, up to 2000 RMB
7. Which of the seventeen Global Sustainability Goals is addressed?

<input type="radio"/> 1 No Poverty	<input type="radio"/> 10 Reduced inequalities
<input type="radio"/> 2 Zero Hunger	<input type="radio"/> 11 Sustainable cities and communities
<input type="radio"/> 3 Good Health and Well-being	<input type="radio"/> 12 Responsible Consumption and production
<input type="radio"/> 4 Quality Education	<input type="radio"/> 13 Climate Action
<input type="radio"/> 5 Gender Equality	<input type="radio"/> 14 Life Below Water
<input type="radio"/> 6 Clean Water and Sanitation	<input type="radio"/> 15 Life on land
<input type="radio"/> 7 Affordable and Clean Energy	<input type="radio"/> 16 Peace and justice strong institutions
<input type="radio"/> 8 Decent Work and Economic Growth	<input type="radio"/> 17 Partnership for the Goals
<input type="radio"/> 9 Industry, Innovation and Infrastructure	
8. What is the purpose and/or objective of this service project?

9. Who(other than Concordia students) or what benefits from this project?
10. What is the “lasting effect” for the intended beneficiaries? How does this project become self-sustaining?
11. Give background and details of the organization including length in service, mission, activities.
12. What will students learn?
13. Where will the service project take place?
14. List the names of the students participating in this service project.

15. What is the timeline for implementing this service project?

16. What is the total amount of RMB being requested?

Provide a list of project costs

Item	Units	Unit cost	Total Cost	Asset
		Grand Total:		

17. Terms and Conditions of the Service Grant:

i. Grant Program Restrictions

- a. Grants are not to be given in the form of a loan.
- b. Grants are not provided to parents of students.
- c. Grants are not provided to Concordia teachers or staff unless associated with a student/organization/class-initiated service project.
- d. Service projects funded by the grants are not meant to be short-term fixes but to have sustainable impact for the beneficiaries.
- e. Programs must be led by Concordia students.
- f. Each group is eligible for one grant per academic year.
- g. Grants will not be awarded retroactively.

ii. Project Evaluation

- a. Within 30 days of the project completion, a project report must be submitted via email to psogrants@concordiashanghai.org. Student(s) may be invited to present their project results at the HS Division Representatives meeting. It shall contain documentation of accomplishments to its project objectives, photos of relevant activities and labelled receipts related to the expenses incurred.
- b. For any grant that is not completed, the students must: 1) provide an explanation to the committee why it was not completed and 2) return all the unused funds to the PSO.
- c. Failure to submit the project report may disqualify the same students/class/student organization from eligibility for future grants.

☐ I agree to the aforementioned terms and conditions of the PSO HS Service Grant program.

Name of Student	Signature	Date
-----------------	-----------	------

Teacher/Advisor Name	Signature	Date
----------------------	-----------	------

HS PSO Grant Committee Review

Received By (HS PSO Representative)	Date
-------------------------------------	------

Date Evaluated by Grant Committee _____

- ☐ Approved for a _____ grant of _____ RMB

- ☐ Declined, reasons