



Bus on Us! Grant Application

Applicant Information:

Name: _____

Title/Grade: _____

School Name: _____

Address: _____

E-Mail: _____

Phone Number: _____

How did you hear of this program?

Freedom's Frontier Website

Freedom's Frontier partner site

Workshop/Conference

Social Media

Other: _____

Would you like to receive the Freedom's Frontier newsletter? Yes _____ No _____

E-mail: _____

Have you received funding from a Bus on Us Scholarship this school year? (Please note: only one scholarship may be given to each classroom/teacher per school year).

Yes _____ No _____

Field Trip Information:

Which Freedom's Frontier National Area partner site will you be visiting?

Is this field trip registered on the Freedom's Frontier website?

(www.freedomfrontier.org) Yes _____ No _____

Approximate date of field trip: _____

Approximately how many students will be attending this field trip? _____

What program will you be attending? Please include a description of the program that includes objectives and how students will benefit from the proposed trip. Please attach additional pages if needed.

Please select **at least one** of Freedom's Frontier National Heritage Area themes (Shaping the frontier, Missouri Kansas Border War, and the enduring struggle for freedom) and explain how this program will connect the students to at least one of these specific themes. Please attach additional pages if needed.

Describe how the field trip aligns with the glass or grade level curriculum. Please attach additional pages if needed.

Use of Funds

Total Expected Transportation Costs: _____

Reimbursement request (75% of expected cost): _____

Please attach a **cost estimate of transportation expenses**. These costs may include time, mileage, driver wages, and/or fuel costs. Please indicate if there is more than one bus. Freedom's Frontier will cover **up to 75% of the invoiced total** of transportation costs.

Verification and Certification

Principal's or Superintendent's Name: _____

E-Mail Address: _____

Phone Number: _____

Applicants Signature: _____

Date: _____

For more information or assistance regarding this application, please contact:

Freedom's Frontier National Heritage Area

P.O. Box 526

Lawrence, KS 66044

Phone: (785) 856-5300

info@freedomfrontier.org