**National Association of Rocketry**

**Cannon Grant Award Application**

**Due date:** June 1

**Institution**

Institution Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 public school  private school  other(explain)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Applicant**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position at institution:  teacher other (explain) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a member of the NAR? yes, NAR # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ no

**Activity Participants**

Grade level of participants (check all that apply):

 K 1 2 3 4 5 6 7 8 9 10 11 12

Number of participants: \_\_\_\_\_\_\_\_\_\_\_

*(Optional) Are the participants members of a demographic group that is historically underrepresented in STEM? Explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**Activity Description**

National, state, or local standards or benchmarks addressed:

Brief description of activity (200 words or less recommended):

**Attach a lesson plan (preferred) or an activity description.** The lesson plan can be original or adapted from a lesson plan by a third-party (for example NASA, NSTA, science museums, space grant consortiums, etc.). Please properly attribute your sources.

**Continuation Plans**

Do you plan to continue this activity in future years?  yes no

If you answered yes, please explain your plans:

Has this activity been supported by an NAR Cannon Grant before? yes no

Have you done this specific activity before? yes no If yes, how will this activity be improved or refined this time?

**Facilities**

Briefly explain the facilities to be used for the activity, including the launch field, if applicable.

Will the local NAR club be involved? yes no

**Publicity**

Will parents, other spectators, or local press be present?

**Expenses**

Explain how you will use the award money – We don’t need a detailed budget.



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**Checklist**

Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Institution:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 I have filled out all fields in the application.

 I have included a brief (about 200 words or less) activity description.

 I have attached a lesson plan or activity description.

My surname is written on the upper right-hand side of all parts of the application, including the attachments.

 I have read the Cannon Grant Award eligibility requirements and I believe that this activity satisfies those requirements.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Order of submission: *(please do not staple)*

Checklist

Application (with brief description of activity)

Lesson plan or activity description attachment

To submit, mail to: **National Association of Rocketry**

**Cannon Educational Award**

**P.O. Box 407**

**Marion, IA 52302**

If you have additional questions or need more information, please contact:

Joyce Ann Guzik

Email: jguzik@mindspring.com