



Due Date: October 15

Funding Period: Yearly

Lethbridge Lifelong Learning Association

CURRICULUM & RESOURCE DEVELOPMENT APPLICATION

Agency:	Contact Name:
Address:	Phone: Fax: E-Mail:

CURRICULUM & RESOURCE INFORMATION

1. Title of new curriculum or resources

Required Programming Area:

- Adult Basic Literacy
- English or French as a Second Language
- Community Issues
 - Healthy Communities
 - Health and Wellness
 - Family Life
- Training for Employment

2. Start Date: _____ and Completion Date: _____

3. What barriered learner/volunteer (target group) is the focus of the proposed curriculum or resources?

4. How did your organization identify a need to develop the proposed curriculum or resources to fill a learning gap in Lethbridge?

5. Curriculum or Resource Outline (please attach):



6. Please complete the following budget form. Include all income and expenses for the Curriculum & Resource Development Project.

INCOME	TOTAL BUDGET	LLA PORTION
LLLA Grant Request		
Fundraising		
Other Grants (specify):		
Other Grants (specify):		
Other (specify):		
TOTAL		

EXPENSES

Wage Costs (research and develop)		
Resource Materials and Supplies		
Printing of Resources		
Administration costs (maximum 10% of eligible expenses):		
Other (Specify):		
TOTAL		

***I hereby authorize that the above answers provide the complete and accurate information about the proposed Curriculum & Resource Development Project and any monies received for this project will be used only for the purposes set out in this application.**

Signature

L.L.L.A. representative name (print)

Date

**Please return this form no later than October 15 to:
Lethbridge Lifelong Learning Association
506-740 4th Avenue South
Lethbridge, AB T1J 0N9
403-524-3868**

**Please note that Curriculum & Resource Development Applications
received after the deadline will NOT be considered.**