



Grant In Aid (GIA) Form

**Project Title:** \_\_\_\_\_

**Project Type:** \_\_\_\_\_  
**Waterhole/Transplant/Habitat/Research/Education/Other (Explain)**

**Affiliate:** \_\_\_\_\_  
**Outfitter Organization/BLM/Game & Fish/Forest Service/Other (Explain)**

**Location of Project:** \_\_\_\_\_  
**State/Territory/Area**

**Description Of Project:**

**Problem to be Solved:**

**Describe How You Propose Solving the Problem:**

**BIOGRAPHY OF APPLICANT**

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

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

**Daytime Phone Number:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**E-mail:**

Are you a current member of WY-WSF? \_\_\_\_\_ **Yes** \_\_\_\_\_ **No**



|  | Cost to be funded<br>by WY-WSF Grant | Cost to be funded<br>by other cooperators |
|--|--------------------------------------|---|
| Equipment.....                                       | \$ _____                             | \$ _____                                  |
| Services.....  | \$ _____                             | \$ _____                                  |
| Permanent, full time salaries will not be considered |                                      |   |
| Publishing.....                                      | \$ _____                             | \$ _____                                  |
| Monitoring.....                                      | \$ _____                             | \$ _____                                  |
| Supplies.....  | \$ _____                             | \$ _____                                  |
| Other (Specify).....                                 | \$ _____                             | \$ _____                                  |
| <b>Totals</b>  | \$ _____                             | \$ _____                                  |

**OTHER ORGANIZATIONS PROVIDING FINANCIAL AID OR SUPPORT OF THE PROJECT (Include any pending amounts applied for.):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ENDORSEMENT:** I hereby agree to abide by the stated requirements of a WY-WSF grant. I also understand all WY-WSF funding stipulations and will provide all necessary reports if I receive a grant from WY-WSF.

**Signature of Applicant** \_\_\_\_\_

**Title** \_\_\_\_\_ **Date** \_\_\_\_\_

**MEDIA CONTACTS:** Please list one or more media sources in your area that we may contact with details of your project:

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_