

**Does your school need funding for health and wellness initiatives?  
A Live Healthy School Grant from Capital BlueCross can help.**

Capital BlueCross will award grants up to \$2,500 to schools wishing to implement a health and wellness initiative that helps students stay physically active or helps to improve nutrition or provide nutrition education to students. In light of the recent pandemic, grant requests will also be considered for COVID-19 related initiatives in support of students (i.e.; student supplemental meal programs, virtual learning initiatives).

School districts may receive one grant per district. Funding decisions are based on the impact of the program and the number of students affected. Grants will be awarded in September 2020.

**APPLICATION DEADLINE: August 1, 2020**

Please proceed to the Grant Portal ([capbluecross.com/investmentrequests](http://capbluecross.com/investmentrequests)) to submit your application online.

## Contact Information

### Applicant Contact Information

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

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

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Name of School: \_\_\_\_\_

Name of District: \_\_\_\_\_

### Principal/Administrator

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

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

### Physical Education Teacher

Email: \_\_\_\_\_

### School Nutrition Manager

Email: \_\_\_\_\_

## Project Details

**What is the initiative you are interested in implementing at your school?**

**Choose one:**

- |   |  |
|---|--|
| <input type="checkbox"/> School Garden                    | <input type="checkbox"/> Physical Space Refurbishing                   |
| <input type="checkbox"/> Classroom Rewards/Contests       | <input type="checkbox"/> Before/After School Physical Activity Program |
| <input type="checkbox"/> Healthy Food Tasting             | <input type="checkbox"/> Classroom Physical Activity                   |
| <input type="checkbox"/> Healthy Cooking Classes          | <input type="checkbox"/> Other (i.e., COVID-19 Initiative): _____      |
| <input type="checkbox"/> Indoor/Outdoor Physical Activity |  |

**Describe the COVID-19, nutrition, or physical activity initiative you wish to implement or enhance in your school. Please include:**

- A description of the initiative and any significant dates or timeline for implementation
- Impact/outcomes of your initiative
- Grade levels that will participate in the initiative
- Ongoing success of the initiative after grant period has ended

**What is the overall budget for this initiative and how will you use the \$2,500 if your project is accepted? (Please itemize your budget below.)**

**Program Equipment and Supplies**

Amount: \_\_\_\_\_ Describe: \_\_\_\_\_

**Incentives, Gifts, and Awards**

Amount: \_\_\_\_\_ Describe: \_\_\_\_\_

**Evaluation**

Amount: \_\_\_\_\_ Describe: \_\_\_\_\_

**Event Costs**

Amount: \_\_\_\_\_ Describe: \_\_\_\_\_

**Other**

Amount: \_\_\_\_\_ Describe: \_\_\_\_\_

**Total:** \_\_\_\_\_

*Questions?* Please email [CommunityRelations.CBC@capbluecross.com](mailto:CommunityRelations.CBC@capbluecross.com) for assistance.