



AMERICAN ASSOCIATION OF ZOO KEEPERS  
**Trees for You and Me**  
**Restoration Grant Application**



**FOLLOW INSTRUCTIONS CAREFULLY – COMPLETE ALL 3 PAGES OF THE APPLICATION**

All Applicants **must** submit with this completed application:  
*curriculum vitae* (3 pages maximum); 2 letters of recommendation (with at least 1 from the Executive Director of your facility/affiliated organization)

**SUBMIT COMPLETED APPLICATION AND SUPPLEMENTAL DOCUMENTATION TO:**

**Electronic (preferred)**  
 Dawn Fleuchaus, Grant Coordinator  
 Trees for You and Me Program  
[TFYM@AAZK.org](mailto:TFYM@AAZK.org)  
 ATTN: TFYM Grant

**With a copy to:**  
 Ed Hansen  
 CEO/CFO  
[Ed.Hansen@AAZK.org](mailto:Ed.Hansen@AAZK.org)  
 ATTN: TFYM Grant

**OR Mail**  
 Ed Hansen  
 ATTN: TFYM Grant  
 8476 E. Speedway Blvd., Ste. 204  
 Tucson, AZ 85710-1728

**PRINCIPAL APPLICANT INFORMATION**

FACILITY OR ORGANIZATION NAME		
PRINCIPAL APPLICANT NAME		
POSITION TITLE		
PHYSICAL ADDRESS FOR DISTRIBUTION OF FUNDS		
EMAIL ADDRESS		
TELEPHONE		
AAZK MEMBER	IF YES, AAZK MEMBER CATEGORY	
YES                  NO		

**ADDITIONAL INVESTIGATORS**

NAME	TITLE	INSTITUTION	EMAIL

**TO BE COMPLETED BY FACILITY/AFFILIATE ORGANIZATION DIRECTOR**

*I endorse the project described herein to be conducted at, or in conjunction with, the organization listed above.*

FACILITY DIRECTOR'S SIGNATURE

DATE



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**APPLICANT PROJECT**

TITLE OF GRANT PROPOSAL:

PROJECT DATES:  
FROM \_\_\_\_\_ TO \_\_\_\_\_

AMOUNT REQUESTED	I WILL ACCEPT PARTIAL FUNDING
	YES                      NO

**Briefly define the objectives of the grant proposal.**

[Empty space for defining objectives]

**Summarize your project's sustainability goals and potential.**

[Empty space for summarizing sustainability goals]



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**APPLICANT PROJECT (CONT.)**

**Detail how grant funding will be applied to the proposal.**

[Empty space for detailing grant funding application]

**Describe how the grant award will be published and shared outside of your organization.**

[Empty space for describing grant award publication and sharing]

**Describe project alterations in the case of partial funding.**

[Empty space for describing project alterations in case of partial funding]

*I have read the TFYM Grant Submission Guidelines and understand that failure to comply with the Guidelines may result in revocation of the AAZK TFYM Grant.*

PRINCIPAL INVESTIGATOR SIGNATURE

DATE

Revised 1/2021