Grants -- Request To Apply

Please enter and submit the Request To Apply Grant Form:

Date of Request:	6/14/2023			
Applicant Department:	Appleton Fire Departmen	t		
Applicant Department Grant Contact Name:	Kelly Lynch			
Applicant Department Grant Contact Title:	Battalion Chief of EMS			
Committee of Jurisdiction:	Safety & Licensing			
Name of Grant:	WE Energies Foundation	Grant		
Funding Source:	WE Energies			
Amount of Grant Request:	\$2,000	Local Match Requirement:	\$ 0	
Source of Match:	General Fund	☐ Non-General Fund		✓ Not Applicable
Timeframe of Grant:	6/1/2023	through 3/31/2024		
Type of Grant Request:	✓ Monetary	Other (explain under 'purp	ose of grant')	
Please keep entries below to	300 characters or less.			
Purpose of Grant (summary):	System Training Kit, Va- consumables to assist t	ulti-Venous IV Training Ar scular Doppler, and small he department in maintaini ecessary to accomplish cri	amount of ng skill	
How Does the Grant Meet City/Department/Program Goals:	I .	of our EMTs improves the q nd visitors to the City of		
What are the Personnel Requirements (include both existing and new staff) of the Grant?:	AFD personnel would insequipment.	truct our staff on the use	of this new	