

**\$250 Mini-Grant Request
SpankOut Day USA, April 30th 2008**

Organization Name: _____
Address: _____
Contact Person (name, title) _____
Telephone: _____ **Fax:** _____ **email address:** _____

Mission of the organization seeking a mini-grant:

Target group for the mini-grant event/program:

Description of the event/program:

How many persons are expected to take part?

How will the success of the program be evaluated? A participant evaluation form is attached and recommended. *If an alternative evaluation is to be used, it should be submitted with this request.*

Name, title, and email address of the person who will be responsible for implementation of the mini-grant

Signature of the CEO or Board Chair of the non-profit applying for the mini-grant

Date of application: _____

Send the request with a copy of your IRS exemption letter (non-profit organizations only) by December 10, 2007 to Center for Effective Discipline, 155 W. Main Street #1603, Columbus, OH 43215 or fax it to 614-221-2110.

**2008 PARTICIPANT EVALUATION FORM
POSITIVE DISCIPLINE EVENT**

Date: _____

Location: _____
City County State

Sponsored by: _____

Type of event: _____

1) Did the event provide information about the negative effects of physical punishment?

_____ YES _____ NO _____ NOT SURE

2) Did you learn at least one new type of non-physical discipline at this event?

_____ YES _____ NO _____ NOT SURE

3) If you take care of children, will you be more likely to use non-physical discipline as a result of what you learned at this event?

_____ YES _____ NO _____ NOT SURE

_____ NOT APPLICABLE Because _____

4) Overall, was the event a helpful way to learn about non-physical discipline alternatives?

_____ Very helpful _____ Somewhat helpful _____ Not helpful

_____ Not sure

5) Should this event be conducted again?

_____ YES _____ NO _____ NOT SURE

6) My suggestions to improve this event are:

Additional Comments: