STEAM Innovation Award Application Questions

Name:	
Organization/Program:	
Title/Affiliation with Organization/Program: Email:	
Program Address:	
County/Counties Served	
Program website (optional)	
Program social media (optional)	
Please upload videos, photos, and/or related materials to support yo	our application.
Section 2: Program Overview	
Type of Program (choose one)	
Year Round	
School Year	
Summer	
Activities Provided: (check all that apply)	
Academic Enrichment	
Arts	
Behavioral and Mental Health Services	
Prevention	
Civic Engagement/Service Learning	
Digital Learning	
Family and Parent Activities	
Financial Literacy	
Health and Wellness	
Life Skills	
Mentoring	
Science, Technology, Engineering, Math (STEM)	
Sports/Recreation	
Tutoring/Homework	
Workforce Development/Career Exploration	
Volunteer Opportunities	
Other	
Number of Youth Served per Age Group (indicate number of each	age group served annually)
0-5	
6-10	
11-14	
15-18	
18-21	

Please describe a typical day at your program. (up to 500 words)

Section 3: STEAM Innovation

Please describe the innovative STEAM programming your organization provides to the youth served? (up to 500 words)

Please describe the impact your innovative STEAM programming has on your students and on the community (i.e. outcome data, various audiences reached, number impacted, etc)? (up to 500 words)

Please share how your program measures success and outcome data from your program (i.e. various audiences reached, number impacted, etc.). (up to 500 words)

Section 4: Confirmation of Application

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Agree Disagree