



LANSING EDUCATIONAL FOUNDATION

BCBA & BCaBA Grant Request Form



Board Certified Behavior Analyst / Board Certified Assistant Behavior Analyst
Open to Certified and Para Educator Staff

APPLICATIONS DUE: November 1, 2022

Date of Application: _____

Applicant Name: _____ Office Phone #: _____

Building: _____ Grades Involved: _____

SEMESTER	Cost of Total Hours
Cost of Program Hours Summer Semester 2021	
Cost of Program Hours Fall Semester 2021	
Cost of Program Hours Spring Semester 2022	
Cost of Program Hours Summer Semester 2022	
Total Grant Requested:	\$

Name & Address of Program: _____

1. Application: Please attach explanation with additional pages. Summarize in less than ten sentences how these funds support the autism program at USD 469. You may attach your letter to this form.
2. Please describe the components of your BCBA program. How much is online, books, residence requirements, etc.
3. What are your long-term career goals?
4. What is your timeline for completing the degree requirements for the BCBA?

Please note that staff participating in the BCBA and BCaBA Grant Program must be working with students with autism at USD469 during the entire 2022-2023 school year.

Applicant's Signature: _____ Date: _____

Applicant's Title: _____

Approval by Superintendent and Director of Special Education

Amount Approved: _____

Signature: _____ Date: _____

Signature _____ Date: _____

Please return completed forms to Attention: LEF, 200 East Mary, Lansing, KS 66043 or email to kara.thompson@usd469.net

**This cover sheet is required for your grant request to be reviewed.
INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**