

Washington County School Waste Reduction and Recycling Funds and Assistance Application

An executed School Waste Reduction and Recycling Assistance Agreement between Washington County Public Health and Environment and the independent public school district or charter or private school is needed before the completion and submission of this Washington County School Waste Reduction and Recycling Funds and Assistance Application to receive funds and assistance.

Washington County Public Health and Environment staff are available to help throughout the application process and project implementation. This application is a collaborative effort between schools and Washington County and is to be drafted in consultation with county staff or a consultant under contract with the county and in accordance with Washington County School Waste Reduction and Recycling Assistance Guidelines.

Contact Hannah Keller (Hannah.Keller@co.washington.mn.us, 651 430 6683) for assistance and to submit completed application.

To submit a complete application, including the following:

1. Application
2. Last (3) months of waste services bills

Applicant Information

District Name (if applicable): _____

School Name (N/A if application for entire school district): _____

Location address: _____

Project Lead Contact Name: _____

Project Lead Contact Title: _____

Project Lead Phone: _____

Project Lead Email: _____

Project Title (the project title should indicate the project location and focus area):

Current Enrollment: _____

Grade Levels: _____

Project Information

1. Waste Services information:

*If your project is for multiple locations, please complete a table for each location.

Material	Volume (gal. or yd ³)	Number of dumpsters	Frequency of pickup	Hauler	Contract end date
Trash					
Recycling					
Food Waste					

2. Briefly describe your current waste reduction and recycling program(s)

3. Briefly describe why you are requesting assistance through this program and describe the goal(s) you wish to accomplish.

4. Briefly describe what you are requesting assistance for and the work scope task(s) that will be carried out.

5. Briefly describe how you will measure the success of the project goal(s).

6. Describe how you will incorporate students in the project and how you will provide student and staff education on project outcomes.

7. Describe how the activities/project will be sustained after program assistance has been exhausted.

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8. Describe any prior grants, funding, or assistance the school or district has received from Washington County, Ramsey County, or BizRecycling for waste reduction, recycling, or organics management including year's awarded, total amount awarded, and a brief project description.

Grant, funding or assistance	Year awarded	Total amount awarded	Brief description of the project

9. Indicate which item(s) on the Schools Waste Reduction and Recycling Best Practices Continuum best aligns with the project(s) outlined in this application.

Continuum Category (Administration, Recycling and Organics, Education & Information, or Waste Reduction/Reuse)	Continuum Level (Basic, Improved, or Advanced)

10. Itemize the costs for projects proposed through the assistance program. Include any shipping costs and attach vendor estimates, if applicable. Add additional lines to the table as needed.

Item	Cost (\$)
Total	

Authorizing Signature (include all needed authorizing signatures from school and district leadership). Contact Washington County for guidance.

Name: _____

Title: _____

Date: _____