



Project Title: \_\_\_\_\_

Area of Focus (check one): ( )Air Quality ( )Water ( )Waste  
( )Energy ( )Green Space

Location where project will be implemented: \_\_\_\_\_

If community/school/or public area, please give us the address and the contact information.

Building/Facility Name: \_\_\_\_\_

Address:\_\_\_\_\_ City:\_\_\_\_\_State: \_\_\_ Zip:\_\_\_\_\_

Contact Name:\_\_\_\_\_ Phone: \_\_\_\_\_

Please tell us about your project:\_\_\_\_\_

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What are your goals:\_\_\_\_\_

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How will you measure and keep track of the environmental impact?

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How will you define Success?\_\_\_\_\_

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Please feel free to attach additional pages about your project if needed.