

# Elevate The Spectrum

Empowering communities to elevate individuals on the autism spectrum and their families through inclusion, advocacy, and friendship.



## Tamara S. Wheeler Special Education Grant Application

Please be sure to include:

Date :

- COMPLETED APPLICATION
- 2 LETTERS OF REFERENCE
- 1 PAGE DESCRIPTION OF USE FOR REQUEST OF FUNDS

### Contact Information :

First Name :

Last Name :

Address :

County:

:

Phone No :

E-Mail :

### School Information :

School Name

Principal's Name

Address:

Phone Number :

City/Zip:

County:

Website / E-Mail :

District:

Please submit application and information by Nov. 30, 2025 to:

**Info@ElevateTheSpectrum.org Subject: Grant Application 2025**

For questions or concerns, please feel free to contact us at:

Info@ElevateTheSpectrum.org or visit us at [www.ElevateTheSpectrum.org](http://www.ElevateTheSpectrum.org)

FOR ELEVATE USE:

Date Received:

Received By:

