



CONTACT INFORMATION

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SAMPLE ITINERARY

Flight Path & Overlook (45 min.)
Visitor Center (30-45 min.)
Trail Hike to Memorial Plaza and Wall of Names (1 hr.)
Tower of Voices Visit (self-guided & if time allows)

**Length of visit depends upon school travel requirements.*

**Students will eat lunch at teachers' discretion. (approx. 30 min.)*

REQUIRED APPLICATION DOCUMENTS

Transportation Application

Acknowledgements' Page

District Support Letter

Bus Quote – must be detailed (from bus company)

- Number of buses
- Mileage
- Driver layover charges
- Arrival & departure estimates included

****ONLY complete applications that are submitted with ALL FOUR ITEMS at the same time will be considered for funding. Friends of Flight 93 Staff is not responsible for requesting missing application items.**

Internal Use Only
Date:

Fund:
 Scanned/Saved
 Tracked
 Notification

Scheduled:

Invoice:



Transportation Scholarship Application

Terms and Conditions:

Please send a completed application with the REQUIRED ATTACHMENTS to:
Friends of Flight 93 National Memorial, P.O. Box 911, Shanksville, PA 15560, or e-mail our Education Coordinator at dmiller@flight93nationalmemorial.org with the subject line "Transportation Funding Request: SCHOOL NAME."

School Building and Grade Level(s): _____

School District: _____

Contact Name: _____

Contact Name for Day of Trip (if different from above): _____

Address: _____

City: _____ State: _____ Zip code: _____

County: _____ Number of Students: _____ Number of Adults: _____

School or work phone: _____

Cell phone (for contact day of trip): _____

E-mail address: _____

Title 1 School: Yes No

Amount requesting: \$ _____ (MUST match number from attached bus quote)

Company to provide bussing to Flight 93 National Memorial: _____

Estimated Time of Arrival: _____ Estimated Time of Departure: _____

Internal Use Only:
Amount Approved: _____



Acknowledgement Page

Applicants: initial beside EACH acknowledgement. Then print, sign, and date at the bottom. Applications are not considered complete without this page.

- Application for a transportation scholarship does not guarantee financial assistance will be available for your group.
- Transportation grant scholarships come on a first-come, first-serve basis.
- Arrangements for transportation to and from Flight 93 National Memorial will be the responsibility of the teacher or group leader participating.
- Schools are required to send ONE CHAPERONE for every 20 STUDENTS. These chaperones are to be assigned a particular group of students and is responsible for their students' behavior and adherence to rules while at the memorial.
- After the education program takes place, bus invoicing must be billed to the Friends. Invoices must include a cover sheet with payment information and instructions for Friends' staff to process grant funding to bus company vendors.
- **Invoices MUST BE RECEIVED WITHIN 30 DAYS of the trip date, otherwise, the grant recipient forfeits the awarded grant.**
- Only groups with documented approval prior to date of visit will receive transportation scholarship payments.
- **Grants may only be used to transport students from the home school district to the memorial, and back to the home district - NO ADDITIONAL STOPS ARE PERMITTED.**

- *No food is available for sale at Flight 93 National Memorial. All trips will need to make plans for feeding their students (packed lunches, etc.)*
- *Flight 93 National Memorial – like all NPS sites – does not have garbage facilities. BRING GARBAGE BAGS to pack your trash home (including all trash from student lunches).*
- *NO PHOTOGRAPHY is permitted inside the Flight 93 National Memorial VISITOR CENTER due to copyright requirements. This includes photos taken for any reason, including yearbooks, selfies, etc. Photography is encouraged everywhere else in the memorial.*
- **Teachers will prepare students for trip by discussing APPROPRIATE MEMORIAL BEHAVIOR. Students that do not display appropriate behavior will forfeit the district’s ability to apply for a grant in following years.**

Applicant Name (printed):

Applicant Name (signature):

Date:

Sample District Support Letter

**** Must be placed on school district's letterhead****

DATE

Department of Community and Economic Development
The Educational Improvement Tax Credit Program
Center for Business Financing – Tax Credit Division
400 North Street, 4th Floor
Commonwealth Keystone Building
Harrisburg, PA 17120-0225

Dear Sir or Madam:

This letter is in support of the application from Friends of Flight 93 National Memorial to be named as an “Educational Improvement Organization” under the Education Improvement Tax Credit Program (HB996).

The **SCHOOL DISTRICT** agrees to utilize the educational programs at the National Memorial when our students visit during the current school year. The curriculum offered at Flight 93 National Memorial for students in grades four through twelve provides knowledge and experience that is not part of our district’s regular curriculum. We confirm that the Flight 93 National Memorial programs will enhance the curricula in our schools. Teachers, administrators, parents, and students are looking forward to the partnerships with the Friends of Flight 93 National Memorial.

Sincerely,

NAME, Superintendent
School District