

2011-2012 Brookside PTA Grant Application

Date of Application: _____

Grant Amount: \$ _____

Name of Applicant & Email address or phone (for primary contact): _____

Are you a PTA member?: Yes No

Is this request for your classroom, grade, school, or teacher material?

_____ Classroom

_____ Grade

_____ School

_____ Teacher Material

Purpose of Grant:

Please provide description of materials or project. Please include relevant comments and reasons for requests. We welcome attachments, photos, samples, catalog copy and/or pertinent information to help us evaluate your request. Use additional pages for description, if necessary.

Grant Request Date:

IMPORTANT INFORMATION: All 2010/2011 PTA grants must be submitted by May 4th 2012

It is agreed that the grant funds will be spent for the stated purpose on or before: _____ or the funds will be refunded to the PTA. Any unused or unexpected funds will be refunded to the PTA. The School District will provide a complete accounting of the expenditure of the grant funds to the PTA.

Alternative Option if grant is not approved:

Brookside Principal Signature: _____

Brookside Staff required to get before submitting to PTA

PTA USE ONLY

Approved: YES NO

PTA Signatures: _____