

## **PTA Grant Application**

Please submit at least one week prior to an upcoming board meeting. Grant applications submitted later may take an additional month for consideration.

Date:	Submitted by:		Teacher Staff Parent	
E-mail:		Phone:		
Purpose/Use of	Grant:			
Materials/Equ	uipment	Program		
Service		Other		
Provide a comp grant:	lete description of the service, m	naterials, equipment, or it	em that will be paid for with this	
Describe the ne	eds this grant request will addre	ess and who will benefit fr	om it:	
_	quest for a one-time expense or , what will be the cost each year		○ One-time ○ Recurring	
, , ,	ed for a BSF Grant?Yes tate reason grant denied, if knov	_No wn. If No, please explain	why.	
	lditional funding from another so ch and from where?	ource? O Yes O N	0	
Request app	I Elementary Administration proved, Administration providing proved, but no School funding avapproved	partial funding of \$	cipal or PTA Presidents)	

## **Cost Detail: Itemize what will be paid for with the funds**

Charge Description	Amount
1.	\$
2.	\$
3.	\$
4.	\$
	\$
Shipping/Handling	\$
Tax	\$
Total Requested	\$