

# LAWTON PTO

## GRANT APPLICATION / TEACHER REQUEST FORM

Date of application: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Grade/Department benefiting from request: \_\_\_\_\_

Name of person/group applying: \_\_\_\_\_ Contact phone #: \_\_\_\_\_

Which building will this request benefit - Check one:       Elementary       Middle School       High School

Request: \_\_\_\_\_

Date request needed by: \_\_\_\_\_ Amount requested (include shipping fees): \$ \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Building Principal Signature: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Purpose of request:**

Please attach a brief description of your request that includes the following information: What outcomes you hope to achieve and how you will spend the funds you receive. Be sure to include how your request will be used to benefit the children and school. What are your goals and objectives and timetable regarding this request: A complete breakdown of items needed, sources you plan to use and price comparisons / quotes must be included for consideration.

Remit to: Lawton PTO mail box in the Elementary Teachers Lounge or mail to: PO Box 850, Lawton, MI., 49065

**REQUESTS EXCEEDING \$100.00 MUST HAVE A REPRESENTATIVE PRESENT AT A MONTHLY MEETING TO REVIEW THE REQUEST & ANSWER QUESTIONS IN ORDER FOR THE REQUEST TO BE CONSIDERED BY THE PTO.**

**Financial information:**

1. Amount of money available from the school budget is: \_\_\_\_\_

• Building principals signature: \_\_\_\_\_

2. Were other grants applied for?       Yes       No       Not Available

• If yes, what is the name of the grant? \_\_\_\_\_ Amount: \$ \_\_\_\_\_

• If denied, reason: \_\_\_\_\_

3. Were fundraisers attempted?       Yes       No       Upcoming

• If upcoming - Give details: \_\_\_\_\_

4. Were business/individual sponsors contacted?  Yes  No If yes, who: \_\_\_\_\_

5. Checks should be made payable to: \_\_\_\_\_ (please attach/submit invoices or receipts)

Comments: \_\_\_\_\_

**~ Below: For Lawton PTO Committee Use ONLY ~**

*All applications will be reviewed at the PTO meetings held on a monthly basis by the PTO Officers - All application requests will be held on file with the PTO*

Request Received By: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Your request has been:  Approved  Denied  Tabled \* If tabled, it will be revisited: \_\_\_\_\_

Committee Response / Comments: \_\_\_\_\_