Rippleside Elementary School PTO

Grant Application

Applicant (Group and or person submitting request, need a name): _____

Application Submission Date: _____

Grade Level/Department: _____

How many students will benefit from this grant? _____

How will the project/materials benefit your curriculum/department? _____

_____

Briefly describe your project/program, and what sources you plan to use. _____

_____

_____

_____

Date of project/program _____

Please itemize cost below:

_____

_____

_____

_____

Total amount requested (please be specific): $_____

☐ Please check if you would consider a grant amount smaller than the requested amount.

Checks to be made payable to: _____

(Please attach receipts if applicable).

<u>Prior approval is required before you purchase material to guarantee reimbursement.</u>**

Please remember to turn in all receipts, even if the check is made payable to you. The PTO must have receipts for what is reimbursed. **Upon approval of funding, you must use grant money by 6/30/2019 or will NOT be reimbursed.**

Deadlines for submitting requests are listed by month below:
Oct. 8th, Nov. 12th, Dec. N/A (no meeting), Jan. 14th, Feb. 18th, Mar. 11th, Apr. 8th, May 13th
Any requests submitted after deadline will be voted on at the next month's meeting.

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