

### **Grant Request Form**

This form must be completed in order for the CMMS PTSA Board of Directors to consider funding an item, program, or activity. Grant requests will be reviewed at the scheduled Executive Board meeting and voted at the General Membership meeting.

## Please complete the following information:

Name of Applicant:	Email:
Cash Grant Request Amount: \$	Date:
Grade Level or All School (that applies to the grant request):	
Department and Subject:	
Number of Students Grant Item(s) will be used f	or:
Are you a member of CMMS PTSA?	
1. Project Summary (Provide describing how the o	cash funds requested will be used)
2. Project Goals/Benefits/Success (What are the benefit? How will you measure the success of this part of the success of the of the s	goals of this project? What activities will this project project?)
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3. Project Timeline (How long will this project take	? How long will it last?)



## COUGAR MOUNTAIN MIDDLE SCHOOL PTSA

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<b>4. Project Detail</b> (Provide a description how the cash funds requested will be used, what part of the student population will benefit and how this project will encourage continuous improvement in education in our school	
. Is this a one-time expenditure? If not, how will it be funded in future years?	
. Other Information: (Include contact and referrals where the program has been successfully implemente bescribe how success will be measured and communicated to the PTSA. How will you communicate to arents that this was made possible due to the PTSA?)	
. What other organizations have you or will you apply to for funding?	
. What is your plan if PTSA cannot fund this project? Can adjustments be made?	



PRINCIPLE APPROVAL:

## COUGAR MOUNTAIN MIDDLE SCHOOL PTSA

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# Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date Request Received: \_\_\_\_\_ Approved/Denied Date: \_\_\_\_\_

Reason for Denial or Conditions of Approval:

Thank you CMMS PTSA!

PTSA USE: Circle One: APPROVED

DENIED