FE PTA GRANT REQUEST FORM

FE PTA grants are used to support agendas/needs that benefit the students and that create an innovative and informative school environment. We strive to provide funding for these applications to enhance our elementary schools in the Ferndale School District.

Any elementary schools staff member and / or parent who is an FE PTA member is eligible to apply. Items purchased with grant funds become property of the Ferndale School District.

Grant Criteria Include:

- The level of impact upon students’ education / school experience
- The number of students impacted
- Teacher / Staff Member / Parent must be a member of the FE PTA.

  o Approved grant applications will be notified via email upon approval.

  o Only completed applications will be reviewed. Please attach additional documentation, such as photocopies of catalog or Internet items, estimated shipping costs, etc. If possible submit more than one source if a product is being purchased.

  o Applications must be received no later than seven (7) days prior to the next FE PTA meeting. Grant requests received less than seven (7) days prior to the next meeting will be included in the subsequent monthly meeting. This insures inclusion on the FE PTA meeting agenda as well as sufficient time to review the grant request.

  o Grants are subject to approval based on available funds at the time of consideration. If rejected due to this reason, teacher / staff member or parent may re-submit the application for re-consideration when funds / resources are available.

*** Teacher/Staff Member or Parent must be a member of the FE PTA to qualify for Grant***

ELECTRONIC COPIES OF THE FE GRANT APPLICATION CAN BE SENT TO THE PRINCIPAL OF THE CORRESPONDING SCHOOL (DIANA KEEFE, LOWER ELEMENTARY Diana.keefe@ferndaleschools.org or KATIE JEFFREY Katharine.jeffrey@ferndaleschools.org) AS WELL AS THE ACTING FE PTA PRESIDENT.

HARD COPIES OF COMPLETED GRANT APPLICATIONS MAY BE PLACED IN THE PTA MAIL BOXES IN THE MAIN OFFICE AT EITHER SCHOOL. EMAIL THE RESPECTIVE PRINCIPAL AND THE PTA PRESIDENT TO NOTIFY FE PTA THAT THE GRANT REQUEST HAS BEEN SUBMITTED TO CONFIRM RECEIPT.
FE PTA GRANT APPLICATION REQUEST FORM

Date: _______________ Contact Name: ________________________________________________
Grade: ______ Contact Number & Email ________________________________________________

Description: (provide as much detail about your request as possible):
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Approximate number of students impacted: ________________________________________________

Please itemize expenses (include shipping/handling, etc.): ________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Is any other source funding this request? _______ If yes, please list whom.
________________________________________________________________________________________

Total Dollar Amount Requested: _________________________________________________________

Make checks payable to: ______________________________________________________________

Contact info for check distribution: _____________________________________________________

*** Please submit requests for funding seven (7) days prior to a PTA Meeting. Please attach any
additional information that may be applicable to this grant request. ***

Date: _________ Signature of Applicant: _________________________________________________

Date: _________ Signature of Principal: ________________________________________________

FOR FE PTA USE ONLY
Date Received: _______ Executive PTA Vote Date: _______ Approved _____ Rejected______

COMMENTS: _______________________________________________________________________

______________________________________________________

General Public PTA Vote Date: _________ Approved _______ Rejected _________

COMMENTS: _______________________________________________________________________

______________________________________________________

If approved, Total Amount Awarded: _________ Date of Payment: _________ Check #: _________