

RHEIN BENNINGHOVEN PTA GRANT REQUEST FORM

Project Title: _____

Applicant's Name: _____

Position: _____

Amount Requested: \$_____ (must include shipping & handling)

Date: _____

How many students will this project reach? _____

At what age level is this project directed? _____

Which School Improvement Goal does this project address? _____

Briefly describe your project:

Briefly state the goals and objectives of your project. What do you hope to accomplish?

What survey tool(s) will you use to measure the success of your project?

What is the long-term impact of your project on your students and school?

Please submit a district requisition form listing the expenditure of your project with location of where items can be found and their cost.

Please print this page and return completed form to the PTA mailbox