



Sehome High School

Academic/Athletic/Activity/Arts Enrichment PTSA Mini-Grant Request

(Monies allocated from Scrip/auction fundraising)

Note: Requests must be signed by Colin Cushman if for a club/activity and/or principal prior to placement in the PTSA Box in the main office or can be sent via email to Sehomehighschoolpta@gmail.com. Requests must include information below. Requests will be discussed and voted upon at each month's SHS-PTSA meeting (4th Wednesday of the month, generally). Notification of the funding decision will be sent via email within the week following the PTSA meeting at which it was discussed. Recipients of funds may be asked to present to the PTSA regarding the impact of the grant once it is implemented.

Name/Dept Making Request: _____

Prior to submitting this request, discuss your funding request with your Department Chair and Principal to determine if building or district monies are available. It is our goal to coordinate funding requests with other potential funding sources in order to enhance the use of available monies.

Contact person: _____

Email: _____ Phone: _____

Date of Request: _____ Date received by PTSA: _____

Describe the need for funds:

Registration fee's:	Supplies:
Transportation quote/expense:	Shipping:
Meal expense:	Number of students served:

Impact on student learning and connection to Bellingham Promise:

Please attach/include any estimates, photos or relevant information that has been collected related to this request.

Will a substitute teacher be needed? Please include this expense as part of the grant request if applicable. PTSA can't cover:

Will this request require ongoing PTSA support in future years? If it's recurring annually and a viable activity we'll want to insure it's in our budget. If yes, please explain.

- Total amount requested: \$_____ Include tax, shipping, handling etc. Total cost of project:\$_____
- In addition to building and district monies have any other funding sources been explored? Yes No
- If Yes, What other funds?
- Date by which funds are needed: _____
- Are you a PTSA member? Yes No Do you buy SCRIP at ASB office either monthly recurring or drop in_____?
- Department Chair signature:_____ Colin Cushman's signature if Club/activity/Athletic team_____
- Principal's recommended funding amount: \$_____ Principal's signature: _____

Principal comments/explanation _____

Approved Yes No Dollar amount approved: _____ Date Grant recipient notified via email: _____ / _____ / _____

The accounting procedure is for grant approval to be given via email, event to occur, ASB/Principal office to process the bill (so it's a school sponsored activity) then the PTSA reimburses. PTSA will rarely pay outright due to insurance and liability coverage.

PTSA President signature _____ Grant recipient signature: _____