

Skyline Spartan Grant Application

PROJECT:	/ \$				
		Title		Amoun	t
SUBMITTED BY:		/		/	
	Name		Phone	E-ma	il
DATE:		PTSA MEMBER?	Y	N	
	P	ROPOSAL QUES	TIONS		
(1) Describe your pro	posal in detail - on	a separate sheet if ne	ecessary.		
(2) Itemize the costs	, including tax and	shipping, and attach a	any price quot	tes.	
(3) What is the timel	line to implement?				
(4) How will it foster	student learning?				
(5) How will it streng	gthen our school co	mmunity?			

(6) How does it alig	n with the PISA mission	and/or the Skyline building			
(7) How many and	which populations of stu	udents will benefit?			
(8) Will this have a	long term impact on our	students/school? How long?			
(9) Is this a one-tin	ne expenditure? If not, h	now will it be funded in future years?			
(10) What other or	ganizations have you or v	will you apply to for funding?			
(11) What is your plan if PTSA cannot fund this program? Can adjustments be made?					
***************************************		PRINCIPAL			
SIGNATURE:		DATE:			
		PTSA			
DATES:	1. Request Rec'd	2. Confirmation Sent			
	3. Meeting/Vote	4. Notification Sent			
DETERMINATION:	Approved	Denied			
IF APPROVED:	Amount \$	Conditions			
IF DENIED:	Reasons				