Colonia High School PTO

Teacher's Grant Application

(Please Print)

Please complete this Teacher Grant Application in its entirety and include all required supporting documentation. Provide the total cost of the program or project, as well as a detailed list of all items being requested. Once completed, submit the application to the school Principal for review and approval. After the Principal's approval, the application will be forwarded to the Colonia High School PTO for final consideration. Applicants will be notified of the PTO's decision following the next scheduled PTO meeting or, if applicable, via email from the PTO Executive Board. If the grant is approved, the PTO will reimburse the approved expenses upon receipt of the original invoice, unless the Board has previously approved purchasing the item directly on the applicant's behalf via URL links provided. To be eligible for a Teacher Grant, all Colonia High School faculty and staff applicants must be a current and paid member of the Colonia High School PTO at the time the application is submitted.

Faculty Name:_____ **Date:**_____

Department/Club:_____

Program/Project/Activity:_____

Provide a detailed description including the educational value and number of students who will benefit from this grant:

_____

_____

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_____

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_____

Total Amount of Requested Funds:_____

(Attach all documentation of invoice(s) of cost from vendor(s)

☐ I am requesting funding from the Colonia High School PTO to support the project, program, and/or materials described in this application for the benefit of Colonia High School, its students, faculty, staff, and school community. I understand that, if approved, reimbursement for this Teacher Grant will be made only during the current PTO budgeted school year. I certify that I am, or will become, a current paid member of the Colonia High School PTO as a condition of grant eligibility. I also agree to provide a follow-up summary describing how the funded project, program, or materials have benefited Colonia High School and its students via email to the PTO and school principal.

Faculty Signature:_____ **Date**:_____

Approved:____**Principal:**_____**Date:**_____

Denied: _____ **Principal:**_____ **Date:**_____

CHS PTO Executive Member:_____**Date:**_____