## **Guidelines**

The purpose of the Golden High School PTA Grant Program is to assist educational programs and extracurricular activities when other sources of funding are inadequate. The following are the Grant Program’s priorities: a) classroom support, b) curricular student activities, and c) extracurricular student activities.

PTA members (teachers, staff or family) and student group representatives at Golden High School may apply for a PTA Grant. We do not have a limit on the amount of the request.

1. Grant applications must be submitted to the PTA using the attached form. Completed applications may be sent by email to Kat at katb5280@gmail.com, left in the PTA mailbox or given to any PTA officer anytime up to **April 3, 2020**.
2. Requests will be reviewed at each PTA meeting throughout the school year with the last review by the April PTA meeting. Approved grant recipients will be notified by email.
3. Students may also apply for a grant with written approval from a group advisor or sponsor.
4. The applicant or designee is invited to attend a PTA meeting to provide a brief presentation on the grant proposal that facilitates understanding of the request and gives the PTA the opportunity to ask questions and the applicant to respond.
5. The grant recipient can receive funds by submitting documentation of the cost to the PTA Grant Committee or by requesting direct payment to vendors. Funds must be used for educational resources that benefit Golden High School students and must be completely spent by the last day of the school year.
6. For public accountability, the PTA will publicize the grants that have been awarded.
7. In the event that all the grant money is not awarded during this fiscal year, it will be carried over for next year’s grant fund.
8. Any permanent items purchased with PTA grant money become the property of the department or the student group that made the grant request.

*PTA Grant Application Form 2019-2020*

Date:

Amount Requested: $

Name of Requestor:

PTA Member Y/N

(only PTA members are eligible for PTA Grants)

Group Advisor/Sponsor signature if this is for student requests:

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E-Mail address: Phone

Reason for Request:

How will students benefit from this grant?

Documentation of expected cost:

Use additional sheets if needed to complete this application.

Please attach copies of receipts if applicable or provide name of vendor to receive payment.

PTA Use Only:

Date Approved:

Amount Approved:

Date Disbursed: Final Report Received: