



FACULTY/STAFF GRANT APPLICATION

Faculty/Staff members must be PTSA members to apply for a grant.

Membership forms and information are available at the PTSA website (www.CentrevillePTSA.org).
 Membership is \$9 per year. Email application to: president@cvhsptsa.org or leave form in PTSA mailbox in the Main Office.

RECEIPTS/INVOICES REQUIRED: The PTSA will require receipts for monies awarded. While we would like to honor all grant requests, these funds are limited and will be disbursed on a first come, first serve basis.

Name(s) and email(s) of those applying for the grant: _____

Briefly describe your proposed project/workshop and how you would use the grant: _____

What is the anticipated cost of the project/workshop? Please be as detailed as possible. _____

If the PTSA is not able to fund your request in whole, will partial assistance still allow you to participate in the project/workshop? _____

Additional comments: _____

If approved, to whom should the check be made payable? _____

FOR PTSA EXECUTIVE COMMITTEE

Date Received: _____

Principal's Approval: _____ Date _____

Treasurer's Action: Check # _____ written in the amount of \$ _____ payable to: _____
 _____ on date _____ hand delivered or USPS

Grant denied, funds not available