

Common Grant Application Form

PTO, Educational Foundation, Dads' Club, Booster Club

Applicant (name and phone number) _____ Date _____

School and grade level/department/position _____

Date funds are needed _____ amount requested _____

ITEM(S) FOR WHICH FUNDS ARE BEING REQUESTED: _____

To confirm that the school administration is aware of your application, please obtain a signature and ranking from your building principal and superintendent

Signature of Superintendent _____ date _____

Signature of Building Principal _____ date _____

Principal ranking and comments _____
(not necessary for Dad's club)

Note: Providing ample information helps the organization make more knowledgeable decisions. Please use extra sheets of paper if needed. Incomplete forms will not be processed and insufficient data may cause a project to be turned down.

Please indicate the organization(s) that this application is going to:

- Chagrin Falls Educational Foundation: P.O. Box 235, Chagrin Falls, Ohio 44022
- PTO – one copy to the principal and 1 copy e-mailed to the current PTO Financial VP
- The Chagrin Falls Booster Club: P.O. Box 454, Chagrin Falls, Ohio 44022 **pages 1 & 2**
- The Chagrin Falls Dads' Club: P.O. Box 810, Chagrin Falls, Ohio 44022

Disclosure for the Educational Foundation: To comply with Internal Revenue Code Regulations, we ask that you affirm by your signature below, that you have no familial relationship with any member of the Chagrin Falls Educational Foundation Board of Trustee. Alternatively, if you have such a family relationship, please describe it:

Your Signature _____ date _____

SUPPORT ORGANIZATION USE ONLY

Approved (full or partial grant) Amount _____

Rejected

Signature / Title

Date

Signature / Title

Date

1. Briefly describe your project

Explain why you want to do this project. How will it be used? Who is your intended audience and how will it benefit the target group? What are your educational objectives? How many students will be affected?

2. Budget

What is the total cost of the project? What % is requested from this group?

List equipment and expenditures involved including shipping, handling and other costs. Include comparison prices if applicable (remember sales tax is not paid for, use tax-exempt number).

Please be specific.

1. Timeline - When do you plan to do this? How long will it take?

2. Will this purchase be shared and with whom?

3. Have you applied for funding from elsewhere? If yes, from what other organization.

4. Assessment – What are the expected outcomes? Who will benefit? How will you evaluate these?