

Pinnacle Peak Prep PTO Mini-Grant Application

Date of Request _____

Teacher Names(s) _____ Grade/Class _____

Name of Activity: _____ Activity Date: _____

Number of students benefited: _____ Grant Amt Requested: _____

Project Description: _____

Please attach supporting documentation of costs associated with this mini-grant.

Approval Steps

Mrs. Herbein:

I approve this mini-grant as an appropriate use of PTO funds which will benefit the students/school.

PTO:

This mini-grant is approved and the funds are available for use.

This mini-grant is denied for the following reason.

NOTE: Mini-grants will be not be reimbursed if funding is not first approved by the PTO. The funds must be spent/reimbursed in the same school year that the grant was approved.

I understand that if I spend any money prior to PTO approval that I will not be reimbursed for those costs, and that the funds must be reimbursed in the same school year, preferably in the same quarter, that the grant was approved.

Applicant's Signature

For office use:

Date of reimbursement: _____ Check #: _____ Amt: _____