 TCPS Staff Request for PTA Funding

Date

Contact Name       Email

Department/Grade Level You Teach

This is a Request for:

[ ]  Individual Teacher Grant Funds or [ ]  Grade Level/Department Grant Funds

Please describe how the requested funds will be used and who will benefit from the purchased item(s) or activity:

Please complete the chart below, if applicable, and attach images of items, if available.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Item Description | Quantity | Cost per Item | Location (Store/Website) | Shipping Cost | Total, with Shipping  |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |

Total Requested Funding: $

\*\*Please submit this Request form to your Principal for PTA Board review