



APPROPRIATION OF FUNDS APPLICATION

APPLICANT INFORMATION

Group Name: _____

Contact Person's Name: _____

Contact #: _____

Email Address: _____

PROGRAM/EVENT/PROJECT INFORMATION

Program/Event/Project: _____

Amount Requested: \$ _____ Event Date: _____

EVENT/PROGRAM/PROJECT DESCRIPTION: *(May be typed on a separate sheet)*

1) Summarize the proposed program, event, project and include the target audience, the number of participants, and the ways in which the event will benefit the participants.

2) Describe the planning process for this event.

Please include how you will incorporate students studying remotely.

3) How would partial funding impact this event?

PLEASE NOTE:

Appropriation of funds is subject to a majority vote of the PTO Board. Partial or entire funding will be considered.

Submit applications via email: SLRSDPTO@gmail.com

SLRMS PTO meets via Zoom the first Wednesday of each month at 7pm. While you do not need to be present for the meeting, the board will make a more informed decision, if you are present to answer any questions the board might have.