



**IRVINGTON PTSA
Grant Application**

PTSA Grant Application Process:

- Applicant sends the grant application to the school principal prior to the school’s PAC meeting. (See <http://www.irvingtonnyptsa.org/> for a schedule of PAC meetings by school.)
- Grant Application is discussed at the school’s PAC meeting, and the applicant makes any necessary additions or changes to the application.
- Applicant obtains necessary approval signatures (see page 2).
- Applicant e-mails the complete grant application to: irvnyptsagrant@gmail.com at least one week prior to the monthly PTSA Executive Committee Meetings (Generally the third Tuesday of the month; see <http://www.irvingtonnyptsa.org/ptsa-grant-application.html> for this year’s dates).
- If the grant is awarded, when the project is complete, applicant will be required to complete an evaluation survey on the grant’s effectiveness.

Applicant: _____

School: _____

E-mail address: _____

of students benefiting: _____

Name of project: _____

Grade level of students: _____

Implementation date: _____

Completion date: _____

AMOUNT REQUESTED FROM PTSA: \$
AMOUNT REQUESTED FROM OTHER SOURCES: \$ _____
(Please list those other sources, and whether that funding has been approved: _____ _____
TOTAL AMOUNT OF PROJECT: \$

Please attach a concise proposal, which addresses the following, as applicable:

State the specific classroom/school needs your project addresses. How does the proposed project build on existing programs or otherwise benefit students? Please include how this project incorporates the curriculum and/or is linked to state and/or national standards.

Describe your project. Please be specific, including how students will benefit from the activity and how you will measure whether or not this project has been successful. Indicate methods you will use to accomplish and publicize your project. Please include a description of any technology support you will require.

If this is a repeat grant request, how is the project different from the previous grant request?

If the project is successful, and you would like to continue it in the future, how will it be funded?

BUDGET

Please provide below (or on a separate attachment) an itemized budget including services, supplies, materials, equipment, etc.

Description of Item	Quantity	Unit Cost	Total Cost
AMOUNT REQUESTED FROM PTSA:			\$

APPROVAL SIGNATURES (Those with * are required.)

*Applicant:	Date:
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*Applicant's Principal:	Date:
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If the project requires any technology, or technology support, it must be approved by the Chief Information Officer/Technology Coordinator:

CIO/Technology Coordinator:	Date:
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If the project will alter facilities in any manner, it must be approved by the Director of Facilities:

Director of Facilities:	Date:
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Assistant Superintendent for Instruction & Human Resources:	Date:
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Comments of Assistant Superintendent for Instruction & Human Resources:
