



**Special Request/Mini-Grant Form**

Teacher(s) Name(s): \_\_\_\_\_

Grade Level of Participating Students (circle) K 1 2 3 4 5 6 7 8

Number of Students Participating in Project: \_\_\_\_\_

Number of Teachers Applying: \_\_\_\_\_

Dollar Amount Requested: \$ \_\_\_\_\_

Materials Requested (attach vendor contract/quote, any order forms, and/or detailed product descriptions, if applicable):

\_\_\_\_\_  
\_\_\_\_\_

Summary of Proposed Project (including curriculum standards and learning objectives addressed): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Teacher's Signature \_\_\_\_\_ Date \_\_\_\_\_

Teacher's Signature \_\_\_\_\_ Date \_\_\_\_\_

Teacher's Signature \_\_\_\_\_ Date \_\_\_\_\_

Teacher's Signature \_\_\_\_\_ Date \_\_\_\_\_

Principal's Signature \_\_\_\_\_ Date \_\_\_\_\_

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**For PTO Use Only:**

Date: \_\_\_\_\_ Approved \_\_\_\_\_ Denied

Check #: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Approved By: \_\_\_\_\_