

Gulf Breeze High School PTSO

Spring 2017-2018

Teacher Grant Request Form

Name _____

Contact e-mail _____

Subject/Department _____ Grade Levels _____

Amount of Request (\$250.00 maximum) \$ _____

Which of the following possible funding sources have you explored?

Department Funds _____ SAC _____ Other _____

Scope of Project:

How will the requested items be used in the classroom?

Please attach supporting documentation to substantiate your request.

Collaborative Partners: _____

Deadline to turn in requests for the 2017-2018 Spring Teacher Grants is February 9th.

Funds must be spent by **May 1st**. Please return the completed form to the PTSO box in the office.

The PTSO Board will consider your request and notify you as to whether or not it is approved. Please be advised that should your request be accepted, the IRS requires that you turn in a receipt as proof of purchase of the items requested. Don't assume your grant request will be tax exempt.

Questions? Please contact **Suzanne Landry** at suzlandry@mchsi.com (850) 516-0894

Or **Miki Zimmer** at mikizimm@gmail.com (850) 450-9946