

EAST RIDGE PTA STAFF GRANT APPLICATION 2009-2010

Staff Member Name: _____

Amount Requested: (must include tax and shipping if applicable) \$ _____

Item(s) Requested: (project, program, equipment, resources, etc.) _____

Briefly describe the proposed item: _____

Describe the education value and anticipated benefits to the students: _____

Number of students to benefit from grant: _____ Grade levels involved: _____

Please submit this proposal anytime to the PTA Mailbox, Attention: Denise Nicholson or by email to: president@erpta.org. Applications are reviewed and approved by the East Ridge PTA. Grants may receive full or partial funding. Purchases made with PTA grant funds are the property of East Ridge Elementary School.

<i>PTA Use Only: Approved</i> _____ <i>Funded Amount \$</i> _____ <i>Application #</i> _____
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