

LINCOLN INTERMEDIATE PTSA – REQUEST FOR FUNDS

Name:

Date:

Position:

Amount Requested:

Brief Description of Project:

Who will the project serve and approximately how many students?

How will the project benefit the students?

Can your proposal be partially funded? Yes or No if yes, what's the minimum that you need for the project and how will the remainder of the funds be paid?

If you're using the money to purchase an item for the classroom:

- **Please provide a clear description of the item (attached product brochure if possible):**

- **Will it be made available to other teachers or grade levels? If so, how and when?**

PTSA USE ONLY

Date Received:

Reviewed at Meeting Date:

Approved:

Denied:

Funds Distributed:

Presidents Signature:

Treasurer Signature