

OPPORTUNITY GRANT PROPOSAL

Submitted by:

Name: _____

Phone / Email: _____ / _____

Classroom: _____

1. Description of the Item or Activity: Please check the appropriate category and describe the proposed item.

Mark with "X"	Category	Description (attach backup information as needed)
	Curriculum Enrichment	
	Equipment	
	Supplies	
	Training	
	Technology	
	Other	

2. Population that will benefit from the request

(for example: one class, entire fourth grade, whole school, after-school program, etc.)

3. Will there be ongoing benefits to the school or a group of students? If so, please explain briefly (e.g.: equipment that will last several years or training that will benefit future classes)

4. Cost: Please provide some kind of back-up information for your cost estimate -- notes from phone conversations are fine; specifics are helpful.

5. Alternative funding (optional but helpful)

a.) Have you tried to find other complete or partial funding for this proposal? YES_____ NO_____

b.) Have you requested PTA funding for this proposal before? YES_____ NO_____

c.) Would you be able to match PTA funds with part of your classroom grant? YES_____ NO_____

If so, what Amount_____

6. Comments or additional information (optional)

Authorized signature_____

Please place completed form in the PTA Vice-President’s box in the school office, or submit via email. Attend the next PTA board meeting (for dates: cascadiapta.org/events) to present your ideas. If you have questions, email vicepresident@cascadiapta.org.