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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Grant Requester’s name: | | Click here to enter text. | | | | | Date: | Enter date. |
| Requester’s Phone Number: | | | Click here to enter phone number. | | | | | |
| Requester’s E-Mail: | | | Click here to enter Requester’s e-mail address. | | | | | |
| School Name: | Click here to enter school. | | | | School District: | Enter District. | | |
| Grant Request Amount: | | | | Click here to enter text. | | | | |
| Detailed Grant Justification (Purpose):Click here to enter text. | | | | | | | | |
|  | | | | | | | | |
| Details of Grant Request Amount (Be as specific as possible include breakdown of costs if have multiple items) | | | | | | | | |
| Click here to enter text. | | | | | | | | |
| This Grant Includes Tangible Hardware/Software: Choose an item. | | | | | | | | |
| If Yes, the Hardware/Software Will Be Property of the: Choose an item. | | | | | | | | |
| The Requester Choose an item. will be responsible for maintenance/repair of the tangible hardware/software. | | | | | | | | |
| This Grant Request has been reviewed and approved by: (Must be Principal or Equivalent Head of School) | | | | | | | | |
| Signature of Requester: | | | | | | | | |
| Signature of Reviewer: | | | | | | | | |