

GREYWOLF PTA
APPLICATION FOR FUNDS REQUEST
Please submit to Greywolf Treasurer, for review by Board of Directors

Date: _____

Greywolf Staffer: _____
(please print clearly)

How can we best reach you (email, phone, etc): _____

Amount of Funds Requested: \$_____

Program/Project Title: _____

Who will this benefit (i.e. your class, all of one grade level, etc.) _____

Program/Project Start and End dates: _____

Brief description of Program/Project: _____

When would funds be needed: _____

Attached supplemental information, brochures, etc. Yes No

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GREYWOLF PTA
For Board of Directors Use

Date Reviewed: _____

Additional Information Needed: _____

Comments: _____

Approved Yes No

Check Given to: _____

Amount: \$_____ Check No.: #_____