



# MSAD 51 PTO

## Enrichment Funding Request Form

Name \_\_\_\_\_ Date \_\_\_\_\_  
Title \_\_\_\_\_ School \_\_\_\_\_

### Event Information

Description of Event: \_\_\_\_\_

Date of event: \_\_\_\_\_

Total Amount of Funding Request: \_\_\_\_\_

Have you applied for funding for this event from any other source? \_\_\_\_\_

Are students sharing the cost of this event? \_\_\_\_\_

How many students will benefit from this request? \_\_\_\_\_

Do you anticipate the need for similar funding on an annual basis? \_\_\_\_\_

### Financial Information

Date check is needed: \_\_\_\_\_

Check should be delivered to: \_\_\_\_\_



### PTO Response

This Funding Request has been

\_\_\_\_\_ Approved      \_\_\_\_\_ Denied      \_\_\_\_\_ Tabled, for the following reasons:

\_\_\_\_\_

Amount Granted: \_\_\_\_\_

Signature: \_\_\_\_\_

### PTO Action

Date Paid: \_\_\_\_\_

Check Number: \_\_\_\_\_