

# Otselic Valley Elementary School PTO Funding Request

This form must be completed in order for the PTO to consider funding any project during the school year. Please complete this form and return it to the PTO mailbox in the main office. You may be asked to discuss your request at a PTO meeting.

Submitted by: \_\_\_\_\_  
Date: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Project Name/Title: \_\_\_\_\_

1. Briefly describe your request:  
\_\_\_\_\_  
\_\_\_\_\_
  
2. List your goals and anticipated outcomes:  
\_\_\_\_\_  
\_\_\_\_\_
  
3. List the school population(s) which will most directly benefit from this funding request (for example, which student organization, group, grade level, etc):  
\_\_\_\_\_  
\_\_\_\_\_
  
4. Start date and end date:  
\_\_\_\_\_  
\_\_\_\_\_
  
5. Are you seeking additional funds elsewhere? If so, submit details:  
\_\_\_\_\_  
\_\_\_\_\_

Provide a basic list of expenses and the total funding request:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. Shipping Costs \$ \_\_\_\_\_
6. Tax \$ \_\_\_\_\_

Total funding request: \$ \_\_\_\_\_

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For Accounting Purposes Only

Date Received: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_

Status: \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Approved Amount \$ \_\_\_\_\_

Approved By: \_\_\_\_\_

Comments:  
\_\_\_\_\_  
\_\_\_\_\_