



# Horizon Elementary PTA Grant/Donation Request Form

1. Name of Staff Member(s), Teacher(s) or Administrator(s) requesting the grant / donation. *(List all applying.)*  
\_\_\_\_\_
- If Other (non-Horizon), list here: \_\_\_\_\_
2. Amount requested for grant / donation: \_\_\_\_\_
3. Approximately how many individuals will benefit from this grant / donation? \_\_\_\_\_  
Of those, how many are students? \_\_\_\_\_
4. What audience does this grant / donation serve (i.e. students, club, activity, staff, building, community, etc.)? \_\_\_\_\_  
\_\_\_\_\_
5. Which grade level(s) would benefit from this grant / donation? *(List all applicable.)* \_\_\_\_\_  
\_\_\_\_\_
6. What subject(s), class(es), club(s) and /or activity(ies) would benefit from this grant / donation? *(List all applicable.)*  
\_\_\_\_\_
7. Please write a brief summary of what your grant / donation funds will be used for: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Please enter the name of the company the item(s) / supply(ies) will be ordered from. Include any other additional information that will help with matching the invoice when it arrives at the business office if your grant / donation is approved:  
\_\_\_\_\_
9. Please enter the date and location of the field trip or activity if this grant / donation is not for an item that needs to be purchased: \_\_\_\_\_  
\_\_\_\_\_

Please note: If all or partial grant / donation funds are not used for their intended purpose(s) by the close of the current fiscal year, June 30, all remaining funds must be returned to the PTA.

\_\_\_\_\_  
Signature of Requestor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Horizon PTA President / Representative

\_\_\_\_\_  
Date