Organi:	zation Presid	ent Signature		Check #
Circle (	One	Approved	Not Approved	
Date _				
Amour	nt Granted			
			Now Ric	gel Local School
				PTO/ABC
				rant Application
Name(	s) of Applica	nt(s):		
Project	: Title:			
List the	e grade level(	s), subject area(s)	or extracurricular are	ea(s) where this project will be implemented:
Numbe	er of students	s involved/benefiti	ng from the project a	activities:
Grant A	Amount:			
Othor i	nformation	you wish to provide	٥٠	
Otheri	illolliation y	ou wish to provide	z	
Chaale	0.50			
Check (		rough the school fo	or navment	Processed through individual staff member for payment
	rocessea trii	ough the school le	n payment	Check needs made out to
Assura	nces:			
1.	The signature(s) below signify the understanding that any materials purchased with grant funds become the property of the school district.			
	property of	the school district	•	
	Signature o	f Applicant/Date		Signature of Applicant/Date
	-			
2.	The signature of the Building Principal must appear before this application will be considered for funding. This signature indicates the approval by the Principal for implementation of the project if it is approved for funding.			
	signature ir	idicates the approv	vai by the Principal fo	r implementation of the project if it is approved for funding.
		Signat	ture of Building Princ	inal/ Date

Copies to:
Principal (Original)
PTO/ABC President
PTO/ABC Treasurer
School Treasurer
Staff