

**Patrick Henry Foundation**  
**Funding Request Application**  
 Academic year 2020/2021



**Requestor Information**

Name	
E-Mail Address	

**Grant Request Information**

Project/Item Name	
Classroom Number/Grade	
Requested Amount	
Project/Item Details <i>Please check all that apply</i>	new project/item for our school project will supplement an existing program project will require a substitute teacher project will occur: after school hours      before school hours      during school hours

**Project Details**

Provide information on project member(s). Use an additional page if you need more space.

Name	Title	Certifications/Training	Relevant Experience

Describe the purpose and goals of this project/item(s).  
 Describe expected outcomes of this project/item(s).

**Requestor Signature**

Name (printed)		
Signature		Date

**Principal Review and Approval – required prior to submission to PHF**

Name (printed)		
Signature		Date

**Foundation Use Only:**

Date approved by board: \_\_\_\_\_ If denied,  
 why: \_\_\_\_\_

Date teacher notified of status: \_\_\_\_\_ Next step:  
 \_\_\_\_\_

Payment date: \_\_\_\_\_ Check number: \_\_\_\_\_

