# Yonkers Middle High School



**Funding Proposal**

Proposal Submitted By: Submission Date:

Phone Number for Person Submitting Form:

E-Mail for Person Submitting Form:

Program/Activity Title:

Grade(s) Served:

Program Date(s):

Program Time: (how long is the program during the school day):

Format of Program: Assembly Hands-­‐On-­‐Workshop Off-­‐Site Seminar (Other): **X Play**

Description of Program and its educational (or other) benefits to the children:

Program Cost: Please **further** describe or “breakdown” the funding needs below, and attach relevant documents. For instance, explain the separate costs of the materials, expert presenter(s), teacher(s), if possible, so the PTSA can accurately consider partial funding.

If only partial funding for this program were available, what is the minimum funding you could receive from the PTSA and still follow through with the program?

Is this a repeat program? If yes, when has it been done before?\_\_\_\_\_\_

Has this program ever been sponsored by the PTSA? \_\_\_\_ **\_\_\_\_\_\_**

**PRINCIPAL APPROVAL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Must be signed by the Principal prior to submission to PTSA)**

**Internal Use:**

**PTSA President Approval:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Executive Board Status of Application:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Has Teacher Been Notified?\_\_\_\_\_\_\_\_\_\_\_ Treasurer Notification:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**