|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **FACULTY GRANT REQUEST FORM**   * *Please TYPE* ***(preferred, please)*** *this form.*   *Place the cursor in the box next to or below requested data and type your answer. The box will expand if you need more space.*   * *Email completed Request & documentation to Donna Kroegel.* | | | | | |  | | | | |
| **DATE:** | |  | | | | | | | | |
| **FACULTY MEMBER:** | |  | | | | | | | | |
| **DEPARTMENT:** | |  | | | | | | | | |
| ***Please read Faculty Grant Information Sheet for detailed instructions.***  *(Errors can delay approval and/or processing of your grant.)* | | | | | | | | | | |
| **TYPE OF GRANT REQUEST:** *Place an X in the box to the left of all that apply.* | | | | | | | | | | |
|  | Electronics or Equipment – attach quote from PHS Bookkeeper | | | | | | | | | |
|  | Book(s) – attach quotes from Barnes & Noble and/or Complete Book | | | | | | | | | |
|  | Order from educational website – attach website info and completed order form | | | | | | | | | |
|  | Purchase from local store – attach pricing info and confirmation that in-store pickup is available | | | | | | | | | |
|  | Reimbursement – must be preapproved; attach pricing information | | | | | | | | | |
|  | Other *(specify):* | | | | | | | | | |
|  | | | | | | | | | | |
| **ITEM DESCRIPTION**  *(include MODEL #, if applicable)* | | | **ITEM LAWSON #**  (*if applicable*) | **VENDOR NAME**  **& LAWSON #** | **QTY** | | **PRICE EACH**  **#,###.##** | | **TOTAL COST**  **#,###.##** | |
|  | | |  |  |  | | $ |  | $ |  |
|  | | |  |  |  | | $ |  | $ |  |
|  | | |  |  |  | | $ |  | $ |  |

*Need another line? Place the curser in the last box to the right above and push the tab key.*

|  |  |  |  |
| --- | --- | --- | --- |
| ***Question? See/Email Donna Kroegel***  ***Please complete the additional questions on the next page.*** | **SUBTOTAL:** | $ |  |
| **Shipping & Handling**  **and/or Sales Tax:** | $ |  |
| **TOTAL OF REQUEST:** | $ |  |

***Please help us better understand the purpose and impact of your request by answering the following questions to the best of your knowledge. If not applicable, put N/A.***

*Place the cursor in the box below each question and type your answer. The box will expand if you need additional space. Tab to move from box to box*

|  |  |  |
| --- | --- | --- |
| 1. **Please identify each requested item and how it will benefit academics at PHS*.*** *Please explain anything (acronyms, terms, etc.) not readily known by the average person.* | | |
|  | | |
| 1. **How many students will use or benefit from the item(s) this year?** | 1. **Are grant item(s) usable more than one academic year?** | 1. **Estimate the number of years item(s) will be useful.** |
|  |  |  |
| 1. **Name the class(es) or school group(s) that would benefit from this grant.** | | |
|  | | |
| 1. **Is *any element* of this expenditure helping students needing financial support? If so, please describe in only general terms.** | | |
|  | | |
| 1. **Have you requested a PHS Academic Foundation grant in the past? If so, what was the result?** | | |
|  | | |
| 1. **If you are eligible for funding from any other organization, please name them.** *i.e. PHS Athletic Foundation, a PHS Booster Club or other.* | | |
|  | | |
| 1. **If listed in #8, have you applied to any of the organization(s)?** | 1. **If yes to #9, what was outcome?**   **If no to #9, why not?** | |
|  |  | |

**Thank you very much for taking the time to provide this information.**