

CLASSROOM GRANT



Timber Trail PTO

Instructions for teachers:

1. Fill out the form below.
2. You must sign at the bottom in order for the grant to be considered.
3. Submit the grant and any supporting documentation to the Timber Trail envelope at the front desk.

Teacher Name: _____

**Employee ID
Number:** _____

Teacher Email: _____

Description of Need:

Total Requested: _____

I understand that the grant items purchased with Timber Trail PTO money are the property of Timber Trail Elementary. I also understand that if I leave Timber Trail, the items purchased with grant funds, will remain at Timber Trail.

Signature Date

Approval by Timber Trail PTO Board Member Date

Reviewed by Principal Date

