



PIEDMONT HIGH BOOSTERS

GRANT REQUEST FORM

Name of Applicant: _____

E-mail Address:

Contact Person (if different from applicant):

E-Mail Address:

Coach Endorsement _____ **Date** _____

Athletic Director Endorsement _____ **Date** _____

PHS Principal Endorsement _____ **Date** _____

Program/Sport/Group To Be Served:

Description of item(s) requested or project to be completed, including

- which athletes will be served
- how many athletes will be served
- what changes or improvements are anticipated as a result of the project or use of funds
- how materials will be used and when
- the duration of the project and when it will be implemented
- planned life of the item

Explain the cost of the requests, including,

- the approximate total cost
- the number of items requested (if applicable) and the item costs
- whether funding is being requested from other sources and how the costs might be shared
- whether there will be continuing charges

Please research costs and attach information, copy of catalog page, etc.