

Sequoia PTSA Mini-Grant Application

Please note: Some questions on this application may not pertain to your request. If that is the case, simply answer 'No' or 'N/A' in the blank space provided.

Please email the Mini-Grant committee at sequoiaminigrants@gmail.com with questions.

* Required

1. **Email address ***

2. **Date submitted: ***

3. **Project title: ***

4. **Your name: ***

5. **Your position at SHS: ***

6. **Your phone number: ***

7. **Your e-mail address: ***

8. **What is the name of your department, program, group or club? ***

9. **Are you a current SHS PTSA member? ***

Annual SHS PTSA membership follows the academic year. You can find a current list of members at www.sequoiaptsa.org/?page_id=10

Mark only one oval.

Yes -- Join here: <http://www.sequoiaptsa.org/>

If the \$20 annual membership dues would be a financial burden, click here.

For student groups or clubs

10. Who is your faculty advisor?

11. Provide an e-mail address for your faculty advisor.

12. Has your faculty advisor reviewed and approved your grant proposal?

Grant Information

13. **Grant Description:** *

Provide a brief description of your grant request.

14. **Grant Rationale:** *

If awarded, how will your grant benefit SHS students, staff and/or community. Include specific objectives, and give details about how this grant will support the curriculum or further the goals of your club/community/program activities.

15. How many people will benefit from your grant request? *

16. Will this grant benefit SHS in future years? How? *

17. Grant amount requested (up to \$500): *

Provide an itemized budget with all known expenses listed. Include tax/shipping, if applicable.

18. Will this grant cover all of your expenses? *

Mark only one oval.

Yes

No

19. If this grant will NOT cover all of your expenses, what is your overall budget? How will you get the additional funds needed (i.e. parents, department funds, alumni funds, SHSEF, personal funds, other grants, etc)? If you have identified other sources, are they confirmed? *

20. Have you submitted this (or a similar) grant request to any other organization this year? If so, what organization(s)? And, if so, has it been approved? *

21. **If we are not able to approve your entire request, would partial funding still be useful? If so, what is your minimum amount needed? ***

22. **Have you received a PTSA grant for this (or a similar) request in past years? If so, when did that occur? ***

23. **Is this grant for a recurring expense, activity or event? If so, how will it be funded in future years? ***

24. **Are other individuals from your department, program, group or club submitting the same (or a similar) grant request to the PTSA this year? If so, will these multiple requests benefit the same group of students or community members? ***

For grant requests to fund technology or equipment

25. How do you plan to safeguard the equipment?

26. How do you plan to handle repair, maintenance and fund future consumables?

27. Is similar technology or equipment currently available at the school?

Final Information

28. **Digital Photo Media Release: I give permission to the PTSA, SHSEF and SHS to use and/or publish my name, photo, and/or work in SUHSD publications which may include, but are not limited to, print, electronic, web, and video formats. ***

Permission is strongly encouraged. An Impact Statement, which includes photos, is required if the grant request is approved.

Mark only one oval.

Yes

No

29. **If your grant request is approved, you will be required to complete an Impact Statement after you have used your granted funds. Do you agree to complete this statement before the due date? ***

Failure to complete this statement may result in denial of future grant requests.

Mark only one oval.

Yes

No

A copy of your responses will be emailed to the address you provided
