Completion of application does not guarantee funding. Your presence may be required at a PTO meeting for questions. Please submit the application as far in advance as possible for timely consideration to [President@vlmpto.org](mailto:President@vlmpto.org), [VicePres@vlmpto.org](mailto:VicePres@vlmpto.org), Treasurer@vlmpto.org.

|  |  |  |
| --- | --- | --- |
| **Name of Project or Event:** |  | |
| **Class or Group requesting:** |  | |
| **Teacher/Project Lead:** |  | |
|  |  | |
| **Summary of Project/Event, including timing:** | | |
|  | | |
| **Number of students participating:** | | |
| **Expected benefits of the project to the participating students:** | | |
|  | | |
| **Expected benefits of the project to the school:** | | |
|  | | |
| **Project Expenses:** (May also attach receipt or order form. Copes or scans of receipts will be required.) | | **Amount** |
| 1. | |  |
| 2. | |  |
| 3. | |  |
| 4. | |  |
| 5. | |  |
| **Total** | |  |
| **Amount Requesting from PTO:** | |  |

To ensure timely payment, what name and address should be used to mail any check or pay via Venmo/Paypal necessary for any reimbursement:

|  |  |
| --- | --- |
| **Name:** |  |
| **Address/City/State/Zip:** |  |
| **Phone:** |  |
| **Email:** |  |