



Are you a PTA Member? Yes No

Name: _____

Email Address: _____ Phone: _____

Student(s) Name(s) and Grade(s): _____

Amount of Request *(attach documented cost estimates)*: _____

Which funding priority does your proposal fall under: *(please select one)*

- Providing support for classroom materials, teacher training or professional development
- Field trips, speakers and other enrichment activities
- Before and after school programming
- Parent/volunteer enrichment or training
- Wellness and school safety
- Support Brookdale families with financial need

Please provide a brief overview of your project.

If funded, how would your project help Brookdale students?

If your request is approved, what will be required to implement? If on-going, what would be required?

Is there any other information we should consider in reviewing your proposal?

Please complete this form and email pta.brookdale.bobcat@gmail.com by Friday, October 16. The Brookdale PTA Budget Committee will review your proposal and will contact you directly if your proposal will be presented at the Special PTA Meeting on Monday, October 19.