



6001 Union Mill Rd
Clifton, VA 20124

TEACHER GRANT APPLICATION 2005-2006

Please note: Teachers must be PTSA members to apply for a grant. Membership is \$7.50 for teachers and includes a complimentary copy of the Student Directory.

Name: _____

Subject(s) Taught _____

Briefly describe your proposed project/workshop and how you would use the teacher grant:

What is the anticipated cost of the project/workshop? Please be as detailed as possible.

Additional Comments:

Check to be made payable to:

Check to be mailed to the following address: _____

Principal's Approval: _____

***Please note that the PTSA will require receipts for monies awarded. While we would like to honor all teacher requests, these funds are limited and will be disbursed on a first come, first serve basis.**