POCANTICO HILLS PTA

599 BEDFORD ROAD

SLEEPY HOLLOW, NY 10591

**PTA TEACHER GRANT APPLICATION**

Teacher(s) / Applicant’s Name:

Grade: Date of Application:

Objective:

Description: \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_

\_\_\_\_\_\_

Amount Requested: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
  
Date Funds Needed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teachers may apply for the PTA grant for consideration of funds if the following conditions are met:

1. The grant request is related to the instruction of the children in the teacher’s classroom or supports the working of the school in a way that benefits the development of the children.

2. The applicant should email the grant application to:

[PTA@PocanticoHills.org](mailto:PTA@PocanticoHills.org)

3. The PTA Executive Board will consider all reasonable requests and ultimately maintains the right to either approve or deny grant applications.

Questions may be submitted the PTA: [PTA@PocanticoHills.org](mailto:PTA@PocanticoHills.org)

Thank you!

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teacher’s Signature, Date