

Riverside Brookfield High School PTO Summer Academic/Leadership Enrichment Grant Application 2017

Student Full Name _____

Date:

Current Class Level: Freshman Sophomore Junior

Phone:

email:

Application will not be accepted without the following attached:

- Information regarding workshop, camp, class including registration details.
- Detailed account of all expenses/invoice.
- Signed and dated recommendation from RB faculty/staff.

Conditions of grant:

- This grant is not for athletic or music programs.
- This grant is for individual, not group use.
- This grant is for use during the summer of 2017.
- Current seniors and incoming freshmen are ineligible for this grant.

Completed applications are due to PTO no later than Monday, April 17th.

Grant applicants will be notified by Wednesday, May 10th.

Student Signature

Date

Parent/Guardian Signature

Date

Student Full Name _____

Program Information

Name of program:

Location (full address):

Beginning Date:

Ending Date:

Registration Deadline:

Website or phone number:

Cost of program:

Amount requested*:

**Please note: PTO grant amounts are not guaranteed and amounts may not cover all program costs*

Have you applied for any other grants or scholarships?

If yes, amount applied for?

When do you expect to have a response?

If approved:

Pay organization directly.

Include Payee name and full address:

Pay recipient.

Will require proof of confirmed registration

Student Signature

Date

Parent/Guardian Signature

Date

Student Full Name _____

Essay - Please include: What about this program interests you? How will this experience enhance your leadership skills or benefit you academically? What other benefits do you expect to gain from attending this program?

Student signature

Date

Student Full Name _____

RB Faculty/Staff Recommendation:

Why do you believe this student should receive a PTO Summer Enrichment Grant? Does this activity meet leadership or educational enrichment criteria?

RB Faculty/Staff Signature

Date