

**To: WFHS Faculty**

**From: WFHS PTSA Board and Membership**

**Re: WFHS Faculty Grant Information/Application 2020-2021**

Your PTSA is excited to offer faculty grants for classroom projects and/or educational opportunities not funded by WCPSS. If you are a **current PTSA member** and have a great project or educational opportunity that will enhance your students' learning experience, please complete the PTSA Grant Application Form. **(Please note that our bylaws do not allow us to pay for hotels, travel, consumable items or entry fees for club activities.)** Blank forms are located in the main office in the PTSA mailbox.

The maximum amount you may apply for is \$200.00. Exceptions may be made if there are available funds and if the Reviewer and the PTSA Grant committee approves the request. Grants are subject to fund availability through our yearly fundraising efforts. Grant amounts may vary to adhere to the PTSA Approved Budget at any given time.

To be considered for the grant, your application must be signed by the WFHS Principal as "Reviewer", submitted in a sealed envelope marked for "PTSA Teacher Grant Committee/PTSA President" and placed in the PTSA Mailbox in the Main Office. Deadline for grant requests is Friday, March 26, 2021. The PTSA Grant Committee determines the grant award selections and will provide notification to the requestor of receipt of the application form in 30 days or less. Note: PTSA Meetings are held the second Monday of every month unless otherwise noted on the PTSA Website.

If you are not a current PTSA member, please consider joining the WFHS PTSA for \$5.00! The WFHS PTSA Membership Form is online for your payment convenience. Checks for membership enrollments can also be placed in the PTSA Mailbox. PTSA Membership Forms are also in the PTSA Mailbox.

The WFHS PTSA is a strong and vital student and teacher organization that provides ongoing support for our school community. Your support in joining the PTSA is a way to return that support and show your COUGAR Pride!

Thank you!

**Wake Forest High School**  
**PTSA Faculty Grant Information**

**The WFHS PTSA is pleased to offer financial grants to the WFHS Faculty. Funding for financial grants is subject to PTSA fund availability from year to year, which depends on the success of PTSA Fundraising efforts.**

**Criteria:**

Faculty must be a member of the WFHS PTSA for the year applying for the grant

Must be for educational items, materials, types of tangibles not currently supplied by WCPSS or WFHS.

The purpose of the grant request must be to increase/support student learning, to enhance educational classroom experiences, to produce higher learning opportunities for students.

**Please note that our bylaws do not allow us to pay for hotels, travel, consumable items or entry fees for club activities.**

**Process:**

1. Complete the PTSA Grant Application. Be as specific as possible to expedite the review process. You may include brochures, website links or other helpful materials in your application for PTSA Committee consideration.
2. Place the application in an envelope and mark for the WFHS Principal or Assistant Principal to obtain one signature as "Reviewer".
3. Principal or assistant principal ("Reviewer") will review the application to verify that the request is valid and that no WCPSS funds are available to fund it. The reviewer signature is not an approval of the grant.
4. The PTSA must have the application, with Reviewer signature, in the PTSA Mailbox by Friday, March 26, 2021 for consideration.
5. Notification of the status of your request will be given by the PTSA President or PTSA Grant Review Committee as soon as possible.

**Wake Forest High School**  
**PTSA Faculty Grant Application**

Faculty Name \_\_\_\_\_ Email \_\_\_\_\_

Grade Level \_\_\_\_\_ Department \_\_\_\_\_

Provide a summary of the proposed request:

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How will this request enhance the instruction/education of your students?

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Amount Requested \$ \_\_\_\_\_

(provide documentation to support cost, include S&H, taxes, cost of item, etc.)

Faculty signature \_\_\_\_\_ Date \_\_\_\_\_

Reviewer (WFHS Principal) \_\_\_\_\_ Date \_\_\_\_\_

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**PTSA Use Only: Date rec'd \_\_\_\_\_ Date voted on \_\_\_\_\_**

**Action Taken \_\_\_\_\_ Approve/Deny \_\_\_\_\_**

**PTSA Grant Committee Chair and/or PTSA Officer Signature**

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**Reason for Denial:** \_\_\_\_\_