

Amador Valley PTSA Mini Grant Application

(Please Print Clearly)

Date:

Name:

Dept/Section:

Email
address:

Dept Head

Approval:

1) ARE YOU A MEMBER OF THE PTSA? YES NO

2) DESCRIPTION OF RESOURCES/MATERIALS NEEDED:

3) HOW MANY STUDENTS WILL BENEFIT?

4) ESTIMATED COST (INCLUDE TAX(8.75%), SHIPPING & HANDLING)

5) CHECK(S) SHOULD BE MADE PAYABLE TO: