



## Student Grant Application Form

This form is meant for any current Discovery High School student current school year (2018-19) requesting a grant to assist in any endeavor where the member is participating in a Discovery based club or activity that enhances the characteristics of citizenship, respect for others, generosity, school pride, academic development, health promotion, supporting healthy environments, or mental health promotion. Each student may be granted a maximum of \$75 each fiscal year. Grants may be requested to help subsidize the costs of travel expenses (does not include food/drinks), and activity fees.

Deadlines: September 1 and February 5 of the school year

Please note: We cannot accept late or incomplete applications. All applications should be emailed, faxed or post-marked no later than midnight of the deadline date.

Please submit this form to the Discovery High PTSA or Front Office/Mail room in the PTSA mailbox, as well as proof of registration for the activity where you are a participant.

Discovery High PTSA  
1335 Old Norcross Rd  
Lawrenceville, GA 30046  
discoveryhighptsa@yahoo.com

**Electronically**, please submit a cover letter, itinerary, budget including both sources of fundraising and costs, and other relevant documents to [discoveryhighptsa@yahoo.com](mailto:discoveryhighptsa@yahoo.com). Applications missing any of these supporting documents will not be reviewed.

Applications may be submitted up to 14 days before the event. Receipts are due 30 days after the event has occurred.

Name: \_\_\_\_\_ Student #: \_\_\_\_\_

Student Grade: \_\_\_\_\_ Student Activity: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Amount requested: \_\_\_\_\_  
Maximum (\$75)

Activity Budget				
Project Needs (Please List)	Cost (Estimate)	Funding Source*		
		PTSA	Other Partners	In-Kind Service
1.				
2.				
3.				
4.				
5.				
6.				
7.				
Total Cost (Each Source):				

\*Please list the sources from which you expect to receive support for each item.  
*In-Kind Service* refers to any free services you expect to receive to support the program (volunteer time, use of space, etc.). All columns should add up to the total cost of your project.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Activity Sponsor Signature: \_\_\_\_\_