MMS MCC FUNDING REQUEST

Please complete the following information and drop off in school office MCC mailbox

NAME(S) OF REQUESTOR:			DATE:			
PHONE/EMAIL:						
Relationship to School/PTSO:			Number of Students will this Serve if Funded:			
Descriptive Title for Request:						
Amount of Request:	Are you receiving any oth item/activity? Yes			er funds to support this Is thi amou		a reoccurring cost or one time nt?
If Yes please explain where additional funding is coming from:						
For reoccurring cost: How many years?			Are	e you expecting PTSO to pay this reoccurring cost each time?		
Funding is For: (Circle response)		Activity		Item		Other
If Others please describe:						
Describe in Detail your request: (You may attach a separate sheet no more than a page)						
FOR MCC Use Only: Date Received: Date to MCC Board: Final Decision:						
Date Requestor Informed:						

Please Note: Submit all requests at least two weeks prior to a MCC meeting. Meetings are general held the second Thur of each month in the school year. Your request will be placed on the agenda at the next meeting where time allows. You may be asked to attend that meeting. Requests may take up to 60 days to process so plan early.