

**2017-2018 Curriculum Enrichment Funding Request Form**

* The PTA is instituting a new format for requesting CE funds. There will now be two windows of submission for the entire school year, one at the beginning of each semester. Please refer to the [**Curriculum Enrichment 2017-2018 Faculty Letter**](http://www.greenwichschools.org/greenwich-high-school/pta/forms) for specific changes to the application time line.
* Fill this form out in its entirety and save the form with a file name as instructed in the [**Curriculum Enrichment 2017-2018 Faculty Letter**](http://www.greenwichschools.org/greenwich-high-school/pta/forms).
* **Remember** to attach supporting documents supporting the **full cost** of the experience to your email. Requests cannot be considered until all necessary documentation has been received.
* Email the form to your Department Head. When your Department Head approves the event he/she will forward the email to the Curriculum Enrichment Co-Chair at **Curriculum.Enrichment@ghspta.org**.
* Refer to the [**Curriculum Enrichment 2017-2018 Faculty Letter**](http://www.greenwichschools.org/greenwich-high-school/pta/forms) on the Forms page of PTA on the GHS website for a full list of instructions.
* If you have any questions please contact the GHS PTA Curriculum Enrichment Coordinator at **Curriculum.Enrichment@ghspta.org**.

|  |  |
| --- | --- |
| Applicant:      | App. Date: xx/xx/xxxx |
| Email:       | Event Date: xx/xx/xxxx |
| House:       | Phone: xxx-xxx-xxxx |
| Department:       | Department Head:       |

Description of Program Requested:

Which class(es) will benefit from the program? Provide class titles as they are written in the Course of Study Guide:

What are the specific curriculum standards linking the trip with units of study?:

|  |  |
| --- | --- |
| # of students currently enrolled in course?: 0 | # of students participating in event?: 0 |

What accommodations, if any, are being made for students in the class who are not participating in the trip/event? (e.g., online component accessible on students own time):

**✦✦ Remember to attach all invoices supporting the full cost of the experience. ✦✦**

**✦✦ Requests will not be considered until all necessary documentation has been received. ✦✦**

|  |  |
| --- | --- |
| Admission Charges: $0.00 | Other Expenses: $0.00 |
| Description of Other Expenses:       |
| Transportation Charges: $0.00 | Transportation Provider:       |
| **Total Expense:** **$0.00** |  |

Less Required Student Contribution (min. $5/student required):

|  |  |  |
| --- | --- | --- |
| $0.00 (per student) X | 0 students = | $0.00 total student contribution |
| **Net Amount Requested: \*****$0.00** |  |

**(\*Net Amount Requested must not exceed $40 per student participant.)**

**Checks can only be made payable to GHS.**