

SPEARFISH SCHOOL DISTRICT FUNDING REQUEST

THIS FORM MUST BE COMPLETED AND APPROVED BY THE BUILDING PRINCIPAL PRIOR TO REQUESTING FUNDING FROM AN OUTSIDE SOURCE.

STAFF MEMBER: _____

DATE: _____

FUNDING REQUEST

AMOUNT:

PROJECT OR NEED:

COMMUNITY GROUP(S) BEING APPROACHED:

PLEASE REMEMBER TO SEND A "THANK YOU" IF YOU RECEIVE FUNDING.

OFFICE USE ONLY

**VERIFICATION OF LACK OF FUNDS FOR PROPOSAL AND NOTIFICATION
OF APPLICATION TO OUTSIDE FUNDING SOURCE**

PRINCIPAL/SUPERVISOR:

DATE:

COPY ALL REQUESTS TO THE DISTRICT OFFICE