HARDIN VALLEY ACADEMY FOUNDATION REQUEST FOR FUNDING OR SUPPORT

Staff Nai	me:	Date of Request:
Date Dec	cision Needed By:	
Date of (Conference or Event (if applicable)	· · · · · · · · · · · · · · · · · · ·
***Pleas	se note the following:	
1.	Requests must be completed in full, prin Foundation member designee.	ted, and returned to the principal or HVA
2.	Requests are to be used to benefit HVA sposition, reimbursements of funding will	tudents. Should the requestor resign his/her not be distributed.
3.	The standard for HVA Foundation travel	policies include reimbursement for:

b. Meals reimbursement of up to \$40/day with itemized receipts.

a. Vehicle reimbursement of \$.35/mile based on Google map distance.

4. The HVA Foundation reserves the right to offer partial funding.

Please answer the following questions:

1. What is the program, project, initiative, equipment, training, etc. for which the funding is requested?

2. What are the specific goals and objectives of this project? How will student learning be enhanced by this project? How many students will be impacted by the funding and over what period of time?

3.	What is the estimated funding needed for this request? List specific items and amounts (only requested items will be considered) as well as a total for the request.
4.	Why should your request have priority?
5.	How will you measure the success of your project?
	ASE ATTACH ANY ADDITIONAL INFORMATION THAT MAY HELP RIFY OR DESCRIBE YOUR REQUEST.
	(FOR HVA FOUNDATION USE ONLY)
	approved: Amount Approved: