

TROY BOOSTER CLUB Fund Request Form for TMS & THS Advisors & Coaches

NAME OF ORGANIZATION :

ADVISOR'S NAME: _____

TELEPHONE # _____

EMAIL ADDRESS _____

LOCATION: TMS THS ROOM: # _____



IS YOUR ACTIVITY/ORGANIZATION APPROVED BY THE BOARD OF EDUCATION OR A PRINCIPAL? CIRCLE ON: YES NO

HOW MANY STUDENTS ARE INVOLVED IN THIS ACTIVITY EACH YEAR?

IS THIS REQUEST FROM DESIGNATED FUNDS? OR UNDESIGNATED FUNDS?

AMOUNT REQUESTED FROM TROY BOOSTER CLUB AND WHAT PURPOSE?

Equipment \$ _____

Supervision/Advisor \$ _____

Outside Contractor Services \$ _____

Events \$ _____

Travel \$ _____

Other _____ \$ _____

Other _____ \$ _____

TOTAL REQUEST FROM TROY BOOSTER CLUB \$ _____

PLEASE ATTACH ANY OTHER FINANCIAL AND/OR PROGRAM INFORMATION TO HELP TBC UNDERSTAND YOUR FUNDING REQUEST. Such as: WHAT OTHER FUNDING SOURCES HAVE BEEN EXPLORED FOR THIS EXPENSE? WHO WILL BE RESPONSIBLE FOR THE STORAGE AND UPKEEP OF ANY EQUIPMENT? DOES THE REQUEST FILL AN UNMET NEED FOR STUDENT ACTIVITY?

SIGNED: _____

PRINT NAME: _____ DATE: _____

Thank You for your commitment to our students.

Please deliver your request in advance of the next scheduled monthly TBC meeting in one of the following ways:

1. Place it in the Troy Booster Club mailbox in the main office at THS or TMS
2. Mail it to: Troy Booster Club
1950 Burdett Ave.
Troy, NY 12180
3. Scan it and email to: troyboosterclub@troycsd.org
The Troy Booster Club will acknowledge your request by email or telephone.
You may contact troyboosterclub@troycsd.org with questions.