The purpose of this form is to provide a means for the La Vernia Education Foundation Board to review special funding requests made by La Vernia ISD administration & staff. It is not intended to replace the Innovative Teaching Grant Application, but rather offer supplemental, real-time funding for unanticipated, immediate needs.

Submissions will be considered on a first-come, first-serve basis. There are no restrictions on the amount that can be requested, but all funds must fall within the Board approved budget.

**Please describe the reason for your request. At a minimum, include information such as student impact, timing, sustainability, hidden costs and other important details.**

|  |
| --- |
|       |

**Campus Impact (circle all that apply):**

*Primary*

*Intermediate*

*Junior High*

*High School*

*District*

**Amount requested:** $

**Requested by:**       \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Print Name, Title Signature Date*

**Phone:** ( ) -

**Email:**      @lvisd.org

**REVIEW BY LVISD ADMINISTRATION**

*FOR INTERNAL USE, ONLY*

### lvisd leadership team will review all REQUESTS for consistency with district goals, alternative funding sources, etc.

### the signature on this page will be provided at that review and are not required to be obtained by the grant writer(s) prior.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, **Superintendent**

Dr. Hensley Cone

Reviewed & approved for submission on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *[date]*.