# **MPHS PTSO Teacher's Request for Funding/Expense Reimbursement**

The PTSO encourages faculty members to apply for funding assistance/expense reimbursement to assist with enhancing instructional practice, purchasing instructional materials, or small licensure expenses less than \$200. Please allow **2-3 weeks** for approval and fund availability. The Board meets once a month to review and approve these requests. If the matter is more urgent, please indicate this on your request. We will make some exceptions for urgent matters.

Funding can only be spent on specific application requests made within the current academic year.

### **IMPORTANT / STEPS:**

All requests <u>MUST</u> go through the appropriate channels <u>prior</u> to PTSO approval. Your Department Chair must review, approve, and sign the application;

After Department approval, the application should be sent to Mr. Folk for approval & signature: <u>robert.folk@cms.k12.nc.us.</u>

Once Mr. Folk has approved, please complete the Check Request document as well and include all information (Reimbursement Form, Check Request, and copy of Invoice/confirmation of payment/cost quote/etc.) in your submission to the PTSO Board Treasurer (via email or school mail folder - located in the MPHS mail room). The email address is <u>MPHS.PTSO.Treasurer@gmail.com</u>. Again, check issuance may take 2-3 weeks depending on when the Board is meeting next.

**<u>GUIDELINES</u>**: Approval is based primarily on the following considerations:

- The impact of the program/project/materials on students and the school.
- Funding will be considered only after other potential sources of funding (e.g. department funds, fundraisers) have been pursued by the applicant.
- The ability of the project/need to continue without additional PTSO funds. In most cases, funding is not provided for on-going support of programs.
- Money must be spent only on specific application requests. If there is a change in the request, the PTSO needs to be notified and will review the modifications for approval.
- The expense must support and be consistent with Myers Park High School's vision and goals.

# **MPHS PTSO Teacher Grant Request Form (Continued)**

## **General Information:**

Name	
Email	
Amount Requested	
Department Name	
Grades Impacted	
Date Submitted	
Date Needed (no "ASAP")	

#### **Approval Process:**

### Department Chair Review & Approval:

Department Chair Name	
Signature	
Date	

# Principal Review & Approval:

Signature	
Date	

# PTSO Use Only

Decision Reached (approve or no)	
Board Approval Date	
Funding Amount	