# BEST Foundation Funding Request Form

**Date of request:**  2/7/2018

**Amount requested** Click here to enter text.Click here to enter text.

# **Organization or person requesting funds:**  Click here to enter text.

**Contact Information: Phone**  Click here to enter text.

  **Email** Click here to enter text.

 \***Please note original receipts from vendors will be required for all approved requests**

# Purpose of funds:

Please explain clearly and in detail how the funds will be used.

How will this benefit the students?

Click here to enter text.

How many students will this request benefit?

The entire student body will benefit. For many students, it’s the highlight of their school year.

Bawlf School Administration approval:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DateClick here to enter a date.

Administration signature

B.E.S.T. board approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:Click here to enter a date.

President signature

**B.E.S.T. Use Only:**

Motion brought on:Click here to enter a date. \_

Date

Number in favor: out of Motion carried: yes / no

NOTES:

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Chq #: Account: \_ Receipts attached: