



# Cypress Bay High School School Advisory Committee Funding Request Form



Your Name: \_\_\_\_\_ Organization: \_\_\_\_\_

Department: \_\_\_\_\_ Campus/Room/Extension: \_\_\_\_\_

Project/Activity Name: \_\_\_\_\_

Description of Project/Activity: \_\_\_\_\_

Teachers involved/impacted from the project/activity: \_\_\_\_\_

Number of students to be impacted from the project/activity: \_\_\_\_\_

Dates of your project/activity: \_\_\_\_\_

Comments: \_\_\_\_\_

Vendor/Payee	Item Description	Quantity	Unit Cost	Extension	Notes
<b>TOTAL FUNDING REQUEST</b>					

Expected Results: \_\_\_\_\_

You must present a recap of your results after implementation to the SAC. This should be done at the next scheduled SAC meeting after your project/activity has concluded.

**For Committee Use ONLY:**

Date of Review: \_\_\_\_\_ Recommended \_\_\_\_\_ Not Recommended \_\_\_\_\_

Rationale: \_\_\_\_\_

Funding Appropriated From: \_\_\_\_\_ A+ \_\_\_\_\_ SAC Funds \_\_\_\_\_ A+ New Staff Funds

Committee Comments: \_\_\_\_\_

\_\_\_\_\_  
**Budget Committee Chairperson**

SAC

Approved for Funding
  Not Approved for Funding

\_\_\_\_\_

**SAC Chairperson**