



2024-2025 Henry PTO Grant Request

Date: _____ **Total Request Amount: \$**_____ (include charges for shipping, handling, installation, etc.)

Committee/Organization Making Request: _____

Contact Person: _____ **Phone Number:** _____

Describe WHAT you are requesting financial support for:

(Please attach any catalogs or other information that you think would be helpful in the consideration of this request)

Describe WHO this would impact (the students and/or staff of Henry Elementary) and HOW:

Additional Comments:

Important: Grants are non-recurring and must be re-applied for in each instance
Submit completed form and supporting documentation to:
henryptograntrequests@gmail.com

COMMENTS/QUESTIONS from Review:
