

## **CHAPTS Teacher/Staff Funding Request Guidelines**

- 1. The CHAPTS teacher/staff Funding Request Form and Budget Worksheet:
  - a. Can be found online at www.chapts.org and in the Blank Funding Request Forms slot by the CHAPTS mailboxes in the Chaparral mailroom.
  - b. Please return the completed form the Principal's Secretary for review, approval and signature of the Principal. She will place in it the CHAPTS funding mailbox. If you've had the opportunity to get the Principal's signature yourself you can put the request directly in the CHAPTS funding mailbox.
  - c. The signed request must be received by the Funding Committee by the deadline before the Executive Directors' meeting. Funding Committee deadlines are listed at <a href="https://www.chapts.org">www.chapts.org</a> and are posted in the Chaparral mailroom.
  - d. If you are requesting that the treasurer send a check or have CHAPTS order the materials via the internet, please provide the contact information on the Teacher/Staff Funding Request Form.
  - e. Even if you wish to send the check and order form to the vendor, rather than CHAPTS, please complete the vendor's name and address on the Funding Request Form.
- 2. When reviewing requests, the Funding Committee does consider the number of students benefitting from the purchase.
- 3. Requests should be:
  - a. For educational purposes only
  - b. Not a contribution to a fundraiser
  - c. Not qualify for Tax Credit funds.
- 4. The request can be presented personally (optional) at a Board of Directors meeting and should be noted on the request form along with an approximate amount of time needed for your presentation.
- 5. All unused money will be returned to CHAPTS.

If you have any questions, please contact the vice president of the funding committee at <a href="mailto:vpfunding@chapts.org">vpfunding@chapts.org</a>

## **CHAPTS Teacher/Staff Funding Request Form**

Questions? Contact CHAPTS Funding Vice President at vpfunding@chapts.org

## BUDGET WORKSHEET REQUIRED FOR REQUEST TO BE CONSIDERED. Please print legibly.

| Department:   |  | Dat                    | te:                       |             |
|---|--|------------------------|---------------------------|-------------|
| Request:  |  |                        |                           |             |
| Reason for request and when need  | ed:  |                        |                           |             |
| Approximately how many students   | s will benefit from this reque                             | est?                   |                           |             |
| Other funding resources?  |  |                        |                           |             |
| If the request is approved:   |  |                        |                           |             |
| I will purchase the item(s)   | either locally, by mail order                              | or online and will sub | mit all receipts for reim | ibursement. |
| I will complete the order for have included the CHAPTS TeachI request that CHAPTS pur for specific item numbers and descriptions. | er/Staff Check Request For<br>chase the items online or by | n.                     | •                         |             |
| Vendor Web address  |  | Vendor phone number    |                           |             |
| Vendor Name:  |  |                        |                           |             |
| Vendor Address:   |  |                        |                           |             |
| Requestors Contact Information:   |  |                        |                           |             |
| Name:   |  | Email:                 |                           |             |
| Planning Period:CHS I   | phone ext  | Home/Cell:             |                           |             |
| Principal's Signature   | Date   |                        |                           |             |
| Funding Committee remarks:  |  |                        |                           |             |
| Recommended   | Not Recomm   | ended                  | Deferred                  |             |
| Board Action:   |  |                        |                           |             |
| Approved  | Rejected   |                        | Deferred                  |             |

## **CHAPTS Budget Worksheet**

Required attachment to Teacher/Staff Funding Request Form

| Department:  |                             | Date:                              | Date:             |  |  |
|--|-----------------------------|------------------------------------|-------------------|--|--|
| Request:   |                             |                                    |                   |  |  |
| Please list e  | each item and associated co | sts for the request. Continue on b | ack if necessary. |  |  |
| Item   |                             | Price/Item                         | Total             |  |  |
| 1.   |                             |                                    |                   |  |  |
| 2.   |                             |                                    |                   |  |  |
| 3.   |                             |                                    |                   |  |  |
| 4.   |                             |                                    |                   |  |  |
| 5.   |                             |                                    |                   |  |  |
| 6.   |                             |                                    |                   |  |  |
|  |                             |                                    | Tax               |  |  |
|  |                             | Si                                 | nipping           |  |  |
|  |                             | Total Cost red                     | quested           |  |  |
| An accurate total is required to avoid delaying/repeating the funding request process. |                             |                                    |                   |  |  |
| Request submitted by: _  | Print Name                  | Signature                          |                   |  |  |
| Comments or additiona  |                             | Signitial                          |                   |  |  |

Contact vice president of funding at vpfunding@chapts.org with any questions.