



**WEATHERLY AREA HIGH SCHOOL ALUMNI
ASSOCIATION Po Box 37 Weatherly, PA 18255
www.weatherlyhighalumni.com**

FUNDING REQUEST FORM

Date of request: _____ Date funds needed: _____ Request Amount: _____

Name of teacher making request: _____

Grade level being taught: _____

Subject (s) being taught: _____

Funding purpose(s):

___ Teaching aids (Science Supplies, Special Books, Electronic Devices)

___ Events (Educational Assemblies, Classroom Speakers)

___ Individual Student (For attending out-of-district educational meeting)

___ Club (Educational Activities, Special Supplies)

___ Educational Field Trips

___ Other _____

Please describe in detail how this funding will be used: _____

Are you receiving additional financial support? _____

If YES, how much financial support are you receiving and from where? _____

Please use this space if needed to disclose any additional information we may need to consider your request.

Thank you for your request!

The Board of Directors of the Weatherly Area High School Alumni Association