



*The PTSA's mission is to make every child's potential a reality by engaging and empowering families and communities to advocate for all children.*

## **PTSA Professional Development Grant Guidelines**

**(updated 9/20/2017)**

**Description:** To support the continuing education goals of our teachers and staff, the PTSA is pleased to provide grants for relevant educational experiences and training that align with the PTSA's mission and has the greatest and most significant impact for MPMS students. Most favorable grant applications include requests for professional development opportunities that

- have the potential to enhance the curriculum and educational experience for as many of the applicant's students as possible,
- are for fees and materials associated with the opportunity (travel, lodging, and meal costs are *not* eligible), and
- could not or would not be reimbursed by MPMS or WCPSS.

**Eligibility:** MPMS Teachers and Staff who are members of the MPMS PTSA

**Award:** Up to \$250 per teacher, per budget year (July 1 - June 30). This individual limit may be increased depending on the budgeted fund availability during the last quarter of the school year.

**Award Process Timeline:** *Please obtain the appropriate grade level Assistant Principal's signature for pre-approval before submitting the application to the PTSA.* Applications can be submitted at anytime and are reviewed by the PTSA on a monthly basis. Once the grant application is approved by the grade level Assistant Principal, it is forwarded to the PTSA Grants Committee for review at its monthly Grants Committee meeting. The Grants Committee then presents the application to the PTSA Executive Board, including the school Principal, for final approval and the release of awarded funds to the primary contact listed on the application. NOTE: Grant applications for July and August summer professional development opportunities are welcome during the prior school year, but will not be reimbursed until the fall.

**Award Criteria:** New grant applications are reviewed on a monthly basis, beginning in September, and are ranked using the criteria explained in the Description section. *Grants are then awarded from highest to lowest ranking until Instructional Grant funds for the current school year are exhausted.*

**Required Documents:** Because PTSA funds are for reimbursement only, please include appropriate original legible receipt(s) with the completed Grant Application form. If the application is not accompanied by receipt(s), grant recipients will have six weeks from notification of the award to submit receipts before award is relinquished.

**Contact:** For questions, please contact [president@mpmsptsa.org](mailto:president@mpmsptsa.org).

***Thank you for all that you do!***



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**PTSA PROFESSIONAL DEVELOPMENT GRANT APPLICATION**

**APPLICANT'S NAME:** \_\_\_\_\_ **TODAY'S DATE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**PURPOSE OF GRANT** *(please include information about the professional development opportunity sought):*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DATE(S) OF PROFESSIONAL DEVELOPMENT OPPORTUNITY:** \_\_\_\_\_

**GRADE(S) IMPACTED:** \_\_\_\_\_ **NUMBER OF STUDENTS:** \_\_\_\_\_

**DATE FUNDS NEEDED:** \_\_\_\_\_ **AMOUNT REQUESTED:** \_\_\_\_\_

**TO WHOM SHOULD THE GRANT CHECK BE PAID?**

Name *(please print)* \_\_\_\_\_

Address: \_\_\_\_\_

Email address: \_\_\_\_\_ Phone: \_\_\_\_\_

**\*\*\*\*\* FOR BOARD USE ONLY \*\*\*\*\***

Assistant Principal's Signature for pre-approval: \_\_\_\_\_

Date Grant Application Received by PTSA: \_\_\_\_\_

PTSA Grant Committee Recommendation: Approve / Table / Deny      Date: \_\_\_\_\_

Notes: \_\_\_\_\_

PTSA Board Action: Approve / Table / Deny      Date: \_\_\_\_\_

Notes: \_\_\_\_\_

PTSA President's Signature: \_\_\_\_\_

Principal's Signature: \_\_\_\_\_

Date of Reimbursement Check: \_\_\_\_\_ Check Number: \_\_\_\_\_