

**PTA Budget Request
LONG FORM**

Primary contact person: _____

Phone number: _____

E-mail address: _____

Program Name: _____

Program Description: (Please attach a narrative. Include program goals, why the school needs this program, who will be served by this program, how the program integrates with the school's curriculum [or if no integration required, please state that], who are the individuals involved, etc.)

Is this request for an ongoing program or one-time expense? _____

Timeline for implementation: _____

Number of students to participate: _____ Grade levels: _____

Review and Reporting: (How will the PTA know that the goals have been met? How will the effectiveness of the program be measured?) Please describe: _____

Will the proposal require the establishment of a new committee? _____

Who has been identified to chair/oversee the committee/program? _____

Did you explore and/or are you aware of other alternatives to funding that may support this proposal? (i.e., combining the program with another committee, SIP funds, OUSD, foundation or corporate grants, etc.) Please describe: _____

How many total instructional periods are provided for a typical student? _____

If the total differs by grade level, please indicate the number of periods for each grade.
K _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ SDC _____

How long is one instructional period for this program? _____ minutes.
If the time differs by grade level, please indicate the number of minutes for each grade.
K _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ SDC _____

How many hours of non-instructional time will your program's specialist(s) be under contract?
Specialist 1) _____ Specialist 2) _____ Specialist 3) _____

How many TOTAL hours will your program's specialist(s) be under contract?
Specialist 1) _____ Specialist 2) _____ Specialist 3) _____

What is the total cost of contracted personnel for this program? _____

What is the total of all non-personnel costs for this program? _____

What is the total of your 2012-2013 budget request? _____

Please attach a detailed annual budget. Include costs for personnel/consultants (including # of hours and cost per hour), services, capital equipment (# of items at what cost), disposable materials & supplies, miscellaneous items (insurance, etc.).

Please include any other information that you feel is relevant to the consideration of funding this program/request.

Thank you!