

St. Michael Althetic Boosters Funding Request Form

Name	Position		Sport	
Project Title	Monetary Reque	st	Date	
Signature of	Athletic Director	Signature of Coach		
1. Project	Goal: How will this project benefit your sport?)		
-	Description: How will this be used? How many o	athletes will be involv	red? (Attach a description or	
3. Project	Date and Duration: When are the funds needed	d? When will the pro	ject be completed?	
	and Evaluation: How will you determined/measu SMS be able to utilize of benefit from this p		e project? Will other sport	
5. Project l	Budget: Provide an itemized list of project cos	ts. Please indicate a	t least 2 options for pricing.	
Item	Budget Amount	Item	Budget Amount	

- If an item is not budgeted, requestor should attend a booster meeting to present project and be prepared to answer questions.
- 2) Form can be emailed or given to a booster officer listed on the Athletic website well in advance of needed funds.