

Brown Middle SCHOOL PTSO

SPECIAL PROJECTS GRANT FINAL REPORT: 2018-2019 school year

Fall/Spring Cycle (choose one)

Today's date _____

FINAL REPORT is due on or before the last day of the school year.

Your Name _____

Original Applicant's Name (if different from one completing this form) _____

Email: _____

Team: _____ Room # _____

Title of Project: _____

Please complete the grant report, save it in your name (original applicant's name must be included in document name if the F/U Report is written by another staff member) or title of project, and then send it as an attached document to grants@brownpto.org . No further requests for funding will be considered without a grant report on file.

Brief description of project and outcomes.

Amount requested: \$ _____ Amount spent: \$ _____

How was the money used? (Be specific, include receipts or copies of receipts if possible.)

Please comment on the sustainability of the project once PTSO funding runs out: