

Kennedy High School
PTSA Request Form

NAME: _____ DATE: _____

PHONE NO; _____ EMAIL; _____

I AM A (please check) ___ PARENT
 ___ STAFF.....DEPARTMENT _____
 ___ STUDENT.....GRADE _____

I AM A CURRENT PTSA MEMBER; ___ YES ___ NO

AMOUNT REQUESTING: \$ _____

MAKE CHECK APYABLE TO: _____

REASON FOR REQUEST:

DO NOT WRITE BELOW FOR TREASURER



Request presented at PTSA meeting on _____

Request was ___ Approved.....Funds taken from _____

 ___ Hold... Why?

 ___ Rejected.... Why?

Check number _____ Check date _____ Amount \$ _____

Treasurer Signature _____ Date _____