



SPARROWS POINT HIGH SCHOOL ALUMNI ASSOCIATION, INC.
P.O. BOX 528 CHASE, MARYLAND 21027
sparrowspointalumni.com
Est. 1983

Sparrows Point High School Alumni Association **APPLICATION FOR FINANCIAL ASSISTANCE**

The Sparrows Point High School Alumni Association asks that all requests for financial assistance be made in person by the faculty member making the request, or by another knowledgeable person (students included) that is involved with the group requesting assistance. Please complete this form and email it to sphsalumni@comcast.net or fax it to 410.335.5707. For agenda purposes, we request this form be submitted as far in advance as possible of our scheduled meetings. The Alumni Association meets the third Tuesday of September, December, March and May at 6:30 pm in the SPSHS library.

Group / Organization requesting aid: _____

Requestor's and / or person attending the meeting: _____

Brief explanation of the purpose of the request for financial assistance:

Of the total student body, estimate how many or what percent of students will benefit from this assistance: _____

Is there a school board price for this item? If so, what is it? _____

Does the school board normally fund this item? If so, explain why you are requesting Alumni Association assistance: _____

Have you applied elsewhere for funds? If so, where and what has been or will be provided: _____

Do other school departments have this item? _____

Will you be sharing with other departments? If so, how much? _____

Have you checked with more than one source for the cost of the purchase? If so, what were the prices? _____

Have you raised any funds on your own for this project? If so, how much? _____

What is the total amount you are requesting from the Alumni Association? _____

Your name (Printed): _____ Date: _____