**Battle High School Spartan Alliance**

**Mini-Grant Application**

Any recognized group representing Battle High School may submit a request for project funding. Funds shall be awarded based upon availability and on the criteria below:

* Mini-grant request/s may not exceed $1000 per academic year per organization, club, class, sport team or activity.
* The event must have sanctioned approval of Battle High School administration and Columbia Public Schools, when applicable.
* The funds requested may only be used for the purpose specified. Activities can be project-based or include field trips/events. Funding from mini grants cannot be used for consumables.
* The request must benefit Battle High School and/or a majority of the members of the organization, club or activity.
* Requests must be submitted before November 1 to be considered for the fall or February 1 to be considered for the spring in order for the Spartan Alliance executive board to consider all requests.
* A representative/s of the group or designee shall be required to attend an executive board meeting of the Spartan Alliance to present the request and answer questions.
* All portions of the application must be filled out in its entirety and must be signed by a student representative and/or organization sponsor, teacher or administrator
* Mini-grants cannot be used to purchase athletic uniforms or equipment, individual tickets to non-educational or extracurricular events/venues, sport/club banquets, dances, or food/meals.

**Title & Description of Event:**

**Name of Sponsoring Organization, Class or Department:**

**Student/Teacher/Administrative Representative(s)**

**Please provide name, telephone number & email:**

**Have you applied for previous funding from the Spartan Alliance during this academic year?**

**Please circle: YES NO**

**Number of Active Members\_\_\_\_\_\_\_\_**

**Have your members been involved in Spartan Alliance volunteer activities or events? Yes No**

**If so, briefly explain:**

**Amount of funds requested\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Is the requested amount enough to cover all costs of the project**

**Please circle: YES NO**

**If not, how will or have you obtained the rest of the funding?**

**Give a brief description of the project and how your organization will benefit from this funding.**

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**Signature of Student Representative(s), Sponsor, Teacher or Administrator**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date**

**Submit this application by email to Angela Pigg at apigg11@gmail.com or by placing the application in the Spartan Alliance mail box in the teacher workroom by the deadlines listed on the first page.**

**All recognized student organizations, activities and athletic groups are encouraged to become involved with Spartan Alliance through membership, volunteering for events, and participating in school activities where the Spartan Alliance is involved. Student organizations, activities and athletic groups can earn money for their organization/group by working in the concession stand and spirit store.**