

LPCI School Council Student Enrichment Fund

2019/2020 Application Form

Organization or club requesting funding: _____

Contact person: _____ Email address: _____

Staff Advisor: _____ Number of students involved: _____

Estimated total cost of the project: _____ Funds requested: _____

Other funding sources: _____

Date Required: _____

Please describe the specific purpose of the requested funding. Please provide a rationale for the request and attach any additional information:

Approved by:

Principal

LPCI School Council Executive

Date
