



Student Financial Assistance Request Form

Grant Title: _____

Funding Amount Requested: _____

Family contribution: _____

Date Request Submitted: _____

Date Funding Needed: _____

DESCRIPTION OF PROPOSAL

You will be expected to give up to ____ hours of service to Vocal Support or Paula Holmberg in the following areas:

- Stuff envelopes in programs
- Vocal Support mailings
- Assistance to director as needed
- Help with promoting Jingle at Jakes at middle schools

Would you accept partial funding: __Yes __No

Have you applied for, or are you receiving funding for this proposal from any other source: __Yes __No

If yes, please describe and attach the other application/request form: _____

Submitted by: _____

Telephone: _____

Email: _____

Approved by: _____ Date: _____

Must be approved by your choir director. Please print out, have your director sign, and either scan and send PDF to me or e-mail me.

Please submit to: Jennifer Belz Belz@mchsi.com

On this date, _____, we agree to adhere to the proposed agreement—contributing as described above:

Student signature: _____ Parent/Guardian signature: _____

Vocal Support Committee Only:

Approved: _____

Delayed: _____

Rejected: _____

Date/Initials: _____

Payment/Reimbursement procedure (to be filled out by Vocal Support grant committee):

____ Purchase and provide receipt to Vocal Support for reimbursement

____ Provide Vocal Support with invoice to pay vendor

____ Other: _____

Be sure to make a copy for your records.

The mission of Vocal Support for Minnetonka Choir is to provide visibility, communication, and support for the choral music program across Minnetonka schools with resources that ensure growth and development for all students.