**Section 1: Type of Request**

[ ] JCP Student Organization [ ]  Faculty/Administration [ ] Athletic or other JCP Department

**Section 2: Grant Request Overview**

**PLEASE SUBMIT GRANTS FOR APPROVAL A MINIMUM OF 30 DAYS PRIOR TO DATE PAYMENT NEEDED DATE.**

Date Submitted to FOJ: Click or tap to enter a date.

JCP Organization/Department Requesting Funds:

Amount:

Date Needed: Click or tap to enter a date.

Requestor (Full Name):

Requestor Role: [ ] Student Organization Advisor [ ]  Faculty [ ]  Dept Head [ ]  Admin Team [ ]  Other

Requestor Email: Requestor Phone:

**Section 3: Grant Details**

**NOTE: FOJ Grants may only be used to support JCP students and JCP sponsored activities. If there are non-JCP students or multi-schools/organizations engaged, those individuals and other schools/organizations portion of the budget are not eligible.**

Grant Description:

Number of People Impacted:

Reason for Grant Request:

[ ] Non-CPS Vendor

[ ]  Gap Between Fundraising/Budget and Need

[ ]  Unplanned Expense

[ ]  Other

Has any other fundraising been done for the request: [ ]  Yes [ ]  No [x]  Unknown

**NOTE: BUDGET DETAILS MUST BE SUBMITTED WITH GRANT REQUEST**

**Section 4: Payment Details**

CPS Approved Vendor: [ ]  Yes [ ]  No [ ]  Unknown

Date Needed: Click or tap to enter a date.

Payee Name:

Payee Address:

Payee Phone:

**NOTE: For vendors, a W9 submission is required before payment can be made. FOJ payments will be processsed within 30 days of receiving all necessary paperwork**

**Section 5: Signatures**

| Request Type | **Student Organizations** | **Faculty/Administrators** | **Athletic or Other Dept.** |
| --- | --- | --- | --- |
| Requestor | Student Organization Advisor | Teacher or Administrator |  |
| Signatures | 1. Student Organization Leader
2. Asst Principal or Principal
3. Finance Director
 | 1. Teacher or Administrator
2. Department Head, Asst Principal, or Principal
3. Finance Director
 | 1. Coach or other advisor
2. Athletic Director or other Dept Head
3. Asst Principal or Principal
4. Finance Director
 |

Requestor: Date: Click or tap to enter a date.

Approver 1: Date: Click or tap to enter a date.

Approver 2: Date: Click or tap to enter a date.

Approver 3: Date: Click or tap to enter a date.

Fin Director: Date: Click or tap to enter a date.

**Please download as a pdf and submit grant application with any estimates, receipts, contracts and invoices to** **grants@friendsofjones.org** **with a cc for all approvers a minimum of 30 days prior to date grant is needed.**

**Attachment 1: Budget Details**

**Please Include full budget for expense, including items not covered being requested from FOJ.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Description/Quantity/Cost per Item** | **Total Cost of Item** | **Amount Requested from FOJ** | **Amount Covered by Other Sources** |
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|  | **Total Cost of Items** | **Total FOJ** | **Total Other Sources** |
|  | $ | $ | $ |