



Cabot Panther Foundation

Request for Funding Application

Date Submitted: _____

Name of Organization: _____

Contact Person: _____ School: _____

Goals of Organization: _____

Event/Project Information

If the amount requested is over \$1,000, a formal presentation must be presented to the board during our monthly meeting.

Date of Event/Project: _____ Amount Requested: _____

Official Name of Event/Project: _____

Specific description on how Panther Foundation funds will be used: _____

The Head of the Department and the District Superintendent must approve before submission to the Cabot Panther Foundation.

Head of Department: _____ Date: _____

Superintendent: _____ Date: _____

Approved by Panther Foundation: Yes/No

Amount Funded: _____

Date Received _____

Check Number: _____