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| **S**ammamish  **T**otems  **E**nrichment  **P**rogram  **S**upporters | **Sammamish S.T.E.P.S. Funding Request**  Date Submitted:  Organization Name:  Contact Person:  Phone:       E-mail: |

Complete form and photocopy for your own records. Submit form to STEPS mailbox in workroom or email to Brook Rose, at [steps.president@sammamishtotems.org](mailto:steps.president@sammamishtotems.org). Completed forms must be submitted by last Friday of the month to be considered at next month’s S.T.E.P.S. meeting. A representative from requesting organization must attend the STEPS meeting to present the proposal and answer questions.

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| Total Amount Requested: $      Funds needed by: |
| Funds will be directed toward?    Please provide information about program, activity or item and include comparable pricing.    How will the Sammamish High School Community benefit from this program or item?    Has S.T.E.P.S. allocated funds to this item, activity or program in the past 3 years? When? Amount?    What other money has your organization pursued? Other fundraising?    How will your organization report back to S.T.E.P.S.? |
| For S.T.E.P.S. use only: Date Received:       Presentation Made:  Funding Approved:       Amount of $      Check issued to: |