



Nelson Elementary PTA  
2025-2026 Grants Process and Rules

**The Nelson PTA Grant program supports programs and activities that enhance and enrich student learning and experiences while building our Nelson Elementary community.**

**Grant Proposals Scheduling and Submission**

1. Grant Proposals Deadlines: **October 1<sup>st</sup> December 1<sup>st</sup> April 1<sup>st</sup>** (if funds are available)
2. All grants are due **by 3pm** on the grant due date.
3. Grants can be submitted in hard copy to the PTA box in the office or emailed to [president@nelsonnavpta.org](mailto:president@nelsonnavpta.org)
4. All instructions, deadlines, and forms will be given in a hard copy to staff.

**Proposals and Grants**

Nelson PTA funding criteria:

- Relevance to curriculum, school and/or district goals
- Benefit to students or program/department
- Number of students and/or grades benefited
- Length of program: short term or long term (1 year max)
- Demonstrated need – not a school or district responsibility
- Amount requested
- Funds available

-All teachers, staff, parents, and students are eligible to submit a grant request.

-Each grant must be approved by the Nelson PTA Board of Directors.

-Some grants will not be approved. The reasons for non-approval of a grant may include amount of the grant request, supplanting of district or school responsibility, and overlap with other PTA programs. Rejected grants can be resubmitted if rewritten

-The Board of Directors will communicate decisions to the applicant by the next General Membership Meeting.

**Purchasing, Reimbursement, Failure to use award**

- The list of approved grants will be given to the PTA Treasurer and they will pay all approved grant expenses
- If a grant is not used within 3 months or by May 1<sup>st</sup>, whichever comes first, then the grant awarded reverts back to the use of the PTA. Prior approval to extend these deadlines is available and should be indicated on the grant application.



**Nelson Elementary PTA  
2025-2026 Grant Application**

INSTRUCTIONS: Please provide all information and signatures prior to submission of the application.  
Submit completed application to the PTA box or email to: [president@nelsonnavpta.org](mailto:president@nelsonnavpta.org)

1. Applicant Name: \_\_\_\_\_

Indicate: Student/Parent/Teacher (circle)

2. Name of Proposal: \_\_\_\_\_

Date of Submission: \_\_\_\_\_

3. Email and Phone: \_\_\_\_\_

4. Total Amount Requested: \_\_\_\_\_ Please include shipping, handling, and taxes

5. Minimum partial funding request (is there a minimum amount that would be helpful?):

\_\_\_\_\_

6. Description of how funds would be used and relationship to curriculum, school, or district goals (brief summary). Attach additional information as necessary:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. Approximate number of students that will directly benefit from this grant? \_\_\_\_\_

8. Which grade levels will directly benefit from this grant? \_\_\_\_\_

9. Which department/club will benefit from grant? \_\_\_\_\_

10. What is the duration of the program? (ex: 1 week – no longer than school year) \_\_\_\_\_

11. Date by which funds are needed or anticipated being used? \_\_\_\_\_

12. Is there another potential funding source? If so, please identify: \_\_\_\_\_

\_\_\_\_\_



## **Budget for Grant Application**

Please list out the costs for your proposal. Have price estimates prior to submitting application. PTA cannot cover transportation so please do not include it in the budget.

Quantity	Description	Unit Cost	Total Cost

**Sub Total** \_\_\_\_\_

**Shipping, Handling, Tax** \_\_\_\_\_

**Total** \_\_\_\_\_

*By signing this application, the applicant agrees to follow and abide by the rules outlined*

*above.* Applicant's Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

FOR NELSON PTA USE

**Recording:** Date Received: \_\_\_\_\_ Date Reviewed: \_\_\_\_\_

**Processing:**

Approved to move on: Yes/No (circle one)

Returned for more information: Yes/No (circle) Date Resubmitted: \_\_\_\_\_

Denied: Yes/No (circle) Reason: \_\_\_\_\_

**Nelson PTA Decision:**

Approved/Not approved: \_\_\_\_\_ Amount Approved: \_\_\_\_\_

Date: \_\_\_\_\_ Treasurer Signature: \_\_\_\_\_

Date: \_\_\_\_\_ President Signature: \_\_\_\_\_