

## EXTRACURRICULAR ACTIVITY FUNDING REQUEST FORM

This form is to be completed by ONLY MPS employees. Print off form and complete. BOTH the requestor and the school principal need to sign the form. Fax completed form to the Student Activities Department, fax # 20138. School will be notified if request was approved or denied. If approved, requestor can then complete and submit a Student Activities Requisition Form to the school secretary requesting a purchase order. After a Purchase Order has been issued, ECA funds can be used.

Date: \_\_\_\_\_ Name of Requestor: \_\_\_\_\_ Title: \_\_\_\_\_

School Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Please answer ALL of the following questions as they relate to the extracurricular activity for which funds are being requested. Forms not completed in entirety will be returned unapproved.**

1. I have read the District ECA Guidelines and feel that my request may qualify for the use of ECA funds? ECA Guidelines can be found on the Student Activities website. \_\_\_ Yes \_\_\_ No
2. Is the activity school sponsored? \_\_\_ Yes \_\_\_ No
3. Are all students who may be involved in the activity enrolled in Mesa Public Schools? \_\_\_ Yes \_\_\_ No
4. Is the activity educational? \_\_\_ Yes \_\_\_ No
5. Is the activity optional to the student? \_\_\_ Yes \_\_\_ No
6. Is the activity noncredit and non graded? \_\_\_ Yes \_\_\_ No

If any answer is no, ECA funds cannot be used. If **ALL** six answers are yes continue completing form. Use additional paper as necessary.

1. What is the activity for which you are requesting the use of ECA funds **AND** how is it an extracurricular activity?

\_\_\_\_\_  
\_\_\_\_\_

2. What specifically are you requesting to purchase or pay for with ECA money? E.g. 3 chess boards

\_\_\_\_\_  
\_\_\_\_\_

3. What is the ECA account name and number you are requesting to use? E.g. Student Council, #8101

\_\_\_\_\_

4. Approximately how much money are you requesting? \_\_\_\_\_

5. How does the activity supplement the school's educational program? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of requestor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name of Principal

\_\_\_\_\_  
Signature of Principal

\_\_\_\_\_  
Date

**The District will make the final determination as to whether or not ECA funds may be used for this request. All forms will be kept in file in Student Activities for review and informational purposes as needed by the District, Internal and External Auditors and the State of Arizona.**