

**THE SCHOOL DISTRICT OF PHILADELPHIA
GRANTS COMPLIANCE OFFICE (GCO)**

**PD / EC / OT REQUEST FORM
ALL FUNDING SOURCES**

This form should be
used for all funding

YEAR	FUND	AGENCY	ORG.	ACTIVITY	OBJECT	JOB# / RPTG

B. INITIAL REQUEST
REQUEST CHANGE

C. TYPE OF ACTIVITY (please check one)

EXTRACURRICULAR

PROFESSIONAL DEVELOPMENT

SUMMER

OT

D.

PROJECT TITLE: _____ DATES OF OPERATION: FROM: _____ TO: _____

CONTACT PERSON: _____ PHONE NO: _____ E-MAIL: _____

NAME OF SCHOOL / OFFICE: _____

E. PLEASE PROVIDE A BRIEF DESCRIPTION OF THE ACTIVITY. THIS INFORMATION MUST BE INCLUDED

Include the following: 1) who are the participants being compensated? 2) What is the program intended to accomplish? 3) How does the activity tie to the Schoolwide Plan, if applicable?)

APPROVALS / SIGNATURES

F. REQUESTOR (PRINCIPAL / ADMINISTRATOR)	DATE	G. GRANTS COMPLIANCE MONITOR	DATE
		APPROVED: YES NO	

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