



**LOCAL SPECIALISTS' ASSOCIATION
LSA Activities Grant Request Form**

For the year _____ to _____

This one page form is to be used by a Local Specialist Association to obtain funds for specific activities or workshops to benefit the LSA members.

This form must be submitted to the Chairperson of the District Professional Development Committee, before an activities grant is can be disbursed.

Please print legibly:

Full Name of L.S.A.

President/Contact

School

Email

Home Phone

Description of the Event (including approximate costs involved, date, location, and funds requested)

President's signature: _____

Date Request received: _____

Date Grant Processed: _____

Signature of District Pro D Chairperson: _____