

# SNAC Funding Request Form

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Please see [Funding Request Guidelines on the other side of this form.](#)

Program documentation must be submitted with Funding Request Form.

Please complete a separate form for each request.

Please note: Eligibility is not based on financial need.

\_\_\_\_ Off Island Conference      \_\_\_\_ Educational/Inclusionary Activity

Please check one:

\_\_\_\_ Parent    \_\_\_\_ Professional    \_\_\_\_ Student    \_\_\_\_ Other: \_\_\_\_\_

Name of Applicant : \_\_\_\_\_ Age & Grade of student: \_\_\_\_\_

Applicant's Mailing Address/Zip Code: \_\_\_\_\_

Applicant's Telephone Number (best reachable): \_\_\_\_\_ Email: \_\_\_\_\_

Date of Program/ Event: \_\_\_\_\_

Program/ Event and location for which funding is sought: \_\_\_\_\_

Total Amount Requested : \_\_\_\_\_

Check Payable To : \_\_\_\_\_

How will this program/ item benefit applicant? \_\_\_\_\_

\_\_\_\_\_

Have you received funding from SNAC in the past year? \_\_\_\_ Yes \_\_\_\_ No

If yes, when: \_\_\_\_\_ Purpose of funding: \_\_\_\_\_

Consent and Authorization:

I have completed this form accurately and truthfully. I am aware that if my request is to attend a conference or workshop, I may be asked to share my information, materials, or educational benefits received. I am aware that this funding request form is subject to the board's review.

Parent/Guardian/Sponsor/ Signature \_\_\_\_\_ Date: \_\_\_\_\_

Please return this form to: Any NPS main office, Attention Heidi Fee @ SNAC or mail directly to Heidi Fee 12 Kelley Rd Nantucket, MA 02554. Thank You!

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