FRIENDS of the German International School
8617 Chateau Drive, Potomac, MD 20854,
friends@giswashington.org

FUNDING REQUEST: Purchases

1. Applicant

| Name of Applicant | ◎ Teacher/Employee  
| Applicant is:     | ◎ Student       
|                   | ◎ Parent        
|                   | ◎ GISW Body/Committee (please name): ________________  
|                   | ◎ Other: ________________  |

2. Application

| Type of Application | ◎ First-Time  
|                     | ◎ Repeat    |

Short description of request:  
(Please use additional page for further details)

3. Assessment of Application by Applicant

| The request ... (possible to indicate more than one) | ◎ Serves the education of the students  
|                                                     | ◎ Benefits many students  
|                                                     | ◎ Contributes to the sustainable improvement of the educational environment  
|                                                     | ◎ Cannot be financed from other sources  
|                                                     | ◎ Complies with the purpose of the GISW  

## Costs

### Purchases

<table>
<thead>
<tr>
<th>Purchase description</th>
<th>Type</th>
<th>Manufacturer</th>
<th>Dealer</th>
<th>Total costs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Offer 1 (estimate)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Offer 2 (estimate)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## 4. Assessment of the Funding Request by School Management/ Administration

The School Management supports the application:

- Yes
- No, because: ____________________

Date:

Signature Head of School:

The School Management will contribute an amount from the School’s budget or other sources:

- Yes:
  - In the amount of: $ _____________
- No

Date:

Signature Head of Administration:

## 5. Requested Funding

The applicant requests:

- Full funding
- Partial funding in the amount of:
  - $ _______________________

Funds have to be spent within 4 months of approval, latest by the end of the current school year. If it takes longer to complete the project, you need to reapply!

Date/Signature of Applicant: ________________________________

Attachments: 

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Approved by “FRIENDS” Board:

- Yes
- No

Date/Signature of Chair: ________________________________

Applicant notified on: ________________________________