



1530 Shumate Drive, Bartow, FL 33830
Ph- 863.534.0519 Fax- 863.519.3791

OFFICE USE ONLY
Approved _____
Check sent _____

\$100 Uniform Grant Request Form for Grades K- 8th

*\$100 may be used for one student or multiple students. The school understands that \$100 will be spent by the school to provide the uniform(s). Funds will NOT be given to the parent/guardian.

Please fax to the PEF Office 863.519.3791. One request per school. The school contact person listed below will receive an email confirming information once the request has been reviewed and approved. Requests are only processed August – March.

School: _____ Principal: _____

School Phone: _____ Date: _____

Contact person for this grant: _____

Please list name of student(s) receiving uniform(s) and for each, check all reasons that apply. If you require additional space, please reprint this page.

Student name _____

- Student on free/reduced lunch
- Student has family/home issues preventing purchase
- Student is homeless
- Other? Please explain _____

Student name _____

- Student on free/reduced lunch
- Student has family/home issues preventing purchase
- Student is homeless
- Other? Please explain _____

Student name _____

- Student on free/reduced lunch
- Student has family/home issues preventing purchase
- Student is homeless
- Other? Please explain _____

Student name _____

- Student on free/reduced lunch
- Student has family/home issues preventing purchase
- Student is homeless
- Other? Please explain _____

I agree to the terms of this request. Principal's Signature _____

Date _____