

LUNENBURG PTO REQUEST FOR FUNDING

APPLICATION MUST BE TYPED

- Please type your responses below and email it to: administrator@lunenburgpto.org
- Applications will be accepted between 12/23/09 and 1/22/2010

APPLICANT INFORMATION

Applicant Name: Rhonda Malatos/ Steve Boone

Position: PE teachers

School: High School

Contact Phone Number: 987-582-4115 ext 111

PROJECT INFORMATION

Project Title: PX90 workouts

Amount Requested \$ \$283.00

Project Start/End Dates: on going

1. Project Description: Summarize the proposed project in the space provided. Describe who is the target audience; what will happen; when and where it will occur; and how the project will be executed. NOTE: You may provide additional narrative on a separate sheet of paper, but you *must* summarize the project here. Your answer in the space below may not exceed 750 characters.

We are requesting funds for the PX90 workout program to be a part of our fitness units for high school students. We have a TV that would need a DVD player to complete the program (\$35.00).

PX90 from Amazon.com is (\$140.00). We would also purchase balance discs (12) found at Job Lots for (\$9.00 per disc, normally \$15.00 elsewhere)

The balance disc would add another dimension to the present core station workout we do almost every week.

2. Describe the planning process for this project. What individuals and organizations have been involved as partners and/or advisors? How would partial funding impact this project? Your answer in the space below may not exceed 500 characters.

Partial funding would depend on the partial amount of money if we did not get the DVD player we could not utilize the extra TV.

We could live without the discs but they would add another challenge level to our program.

3. Explain how this project will reach and benefit the students of your school. How will you know the project is successful? Your answer in the space below may not exceed 500 characters.

All students in P.E. classes will benefit from this equipment. The PX90 participants would be given a pre and post test to demonstrate improved fitness. The plank time test is given to students pre and post during each semester.

____Rhonda Malatos____
Signature-Type Name Here

Title Physical Education teacher

Date 1-15-10

FOR PTO USE

SUBMITTED BY DEADLINE __ yes __ no

\$ _____	_____	_____	_____
Amount Approved	Signature of PTO Representative	Title	Date