

# STATEMENT OF WORK (SoW)

Please complete the following document and turn in the document to PTA 2<sup>nd</sup> VP Jen Roberts

Name of Applicant: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Are you a Parent of a Student: \_\_\_\_\_ Yes \_\_\_\_\_ No Name of Student: \_\_\_\_\_

Name of Program: \_\_\_\_\_

Date(s) of Program: \_\_\_\_\_

What is the objective of your Program? \_\_\_\_\_

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What is your Budget?: \_\_\_\_\_ Fee Per Student: \_\_\_\_\_

Please provide a breakdown of costs & supplies:

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Please complete the form and email it to [jeroberts22304@yahoo.com](mailto:jeroberts22304@yahoo.com) or drop it off in the PTA box at Terra Centre.

Once the PTA Executive Board meets to review the SoW we will be contacting you regarding your approval.

Thanks!

TC PTA Board