



Washington High School Alumni Foundation

P.O Box 3033, Fremont, CA 94539

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Classroom and Academic Grants

Mission: To assist the staff of Washington High School in providing quality instruction and unique learning tools and experiences for their students.

Staff Member Name (First and Last):

Contact Information:

Email Address:

Phone Number:

Subject(s) Taught:

What materials or activities would your class(es) benefit from? *Please explain:*

What is the estimated cost of the materials or activity?

What activities or experiences do you plan to initiate with these tools?

How many students' education and learning experience would this improve?

What other activities have you facilitated that have benefitted student learning?

Other Comments:

When completed: submit to Department Chair for approval. After approval – forward to the WHS Alumni Foundation (email above).

Department Chair Approval: _____