

GO GRANT AMENDMENT FORM

I, _____ (Teacher's Name) of
_____ (School's Name)

request to amend the _____
on our GO Grant Application.

I request to amend the: _____
from _____
to _____

Additional Comments: _____

Signature: _____ Date: _____

Email: _____ Telephone: _____

Staff Use

GO Grant #: _____
Date Received: _____ Date Approved: _____ Date Notified: _____