Executive Leadership Program

Request for Funds

Please complete the form and send it to your coach. Ask your coach if you need help completing the form.

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| --- | --- | --- | --- | --- | --- | --- |
| Date: |  | | First and Last Name: | |  | |
| Coach’s Name: | |  | | Amount Requested: | |  |

**What would you like to purchase with this money? (Add line items as necessary)**

|  |  |  |
| --- | --- | --- |
| **Item Description** | **Cost** | **Link** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **TOTAL** |  |  |

**What program goals will this help you achieve? How will these goals improve your life?**

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**What steps have you already taken to achieve these goals?**

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**Are you doing anything to reduce the cost of these items (discounts, etc.)?**

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\*This form will be submitted to the Valley Guardians Committee for approval during their monthly board meeting.