

Superintendent's or Head of School [for non-public] Endorsement Form

(A completed form must accompany each application)

Please indicate your endorsement of this application by responding to the questions below and signing this form.

1. In your judgment, what is the likelihood that this project will generate new information or insights that will help inform decisions made by the district? Please explain.
2. Do you have access to or are you aware of alternate sources of funding for any expenses listed in the project budget?
3. How will you district administration assist/support this project beyond the initial funding of this grant?

The district endorses the applicants' request to GAR Foundation for \$_____ and has made the applicants aware of relevant district policies and practices relating to the application for and administration of grants. The district also accepts fiscal responsibility for any grant resulting from this request. Yes / No (circle one)

Signature of Superintendent	Print Name	Date
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School	School District
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Address, City, State, Zip

Superintendent's e-mail:
