

**Safe School/Risk Management
Safe Schools Grant
Request for Funding
2007-08**

Date:

School:

Principal:

Assistant Principal(s):

Area Executive Director:

Safe Schools/Risk Management Committee

Names

Positions

School Enrollment (Oct. 1, 2007) _____ (eligible amount \$.50 per student)

Number of Certificated Staff _____

Briefly describe your plan for using these funds based on your school's Safe Schools/Risk Management needs, goals, and objectives. Provide a short description of the activities you will accomplish in order to build positive relationships with local community responders. How will you evaluate the success of your activities?

Proposed Budget:

Due Date: May turn in any time after Oct. 1, 2007 and before June 1, 2008.

Return to Kerrie Naylor, Ph.D., Executive Director, Bingham K-12 Feeder System when completed. Once your request has been approved and processed a check for the eligible amount will be mailed to your school.