



Teacher Wishlist Signature Page

** This form must be completed with required signatures, scanned and uploaded with your application for consideration.

School _____

The Requesting school agrees to provide documentation of grant activity and authorizes the South Bend Education Alliance to use written reflections, quotes, photographs or other representations of said funded activity in SBEA publications.

I have reviewed the requested items and approve this Teacher Wishlist for submission.

Name (printed) of Lead Applicant: _____

Signature of Applicant: _____ Date: _____

Principal Name (printed): _____

Signature of Principal: _____ Date: _____