**Denison ISD DonorsChoose Pre-Approval**

Any Denison ISD employee wishing to post a project on the DonorsChoose.org (DC) crowd-funding website must first complete this form, secure all approvals indicated, and agree to all statements on the “Teacher Acknowledgments and Signature” page.

**Contact Information of Teacher/Applicant**

|  |  |  |
| --- | --- | --- |
| 1 | First Name |  |
| 2 | Last Name |  |
| 3 | DISD email address |  |
| 4 | Phone number |  |
| 5 | Teaching assignment |  |
| 6 | Campus |  |
| 7 | Principal |  |

**Timing**

|  |  |  |
| --- | --- | --- |
| 8 | Target date to post the project |  |

**Project Description**

10. Provide a brief summary of the project.

*[PASTE PROJECT DESCRIPTION HERE]*

**Technology**

|  |  |  |
| --- | --- | --- |
| 11. | Does this project involve electronic devices, software, apps, or online subscriptions? | If yes, attach documentation of the technology departments response confirming approval of the proposed purchases.  🞏 N/A 🞏 See attached |

**Money**

12. Enter the dollar amount being requested for this project: $   
*Note: It is understood that fluctuations in products’ prices and/or availability may occur that are beyond the teacher’s control, resulting in some variation from this exact dollar figure.*

**Teacher Acknowledgments and Signature**

|  |  |
| --- | --- |
|  |  |
| 13 | * + I am an eligible applicant, per DonorsChoose definition: a full-time employee (educator) who works directly with students at least 75% of the time.  *In addition to teachers, DC also welcomes librarians, guidance counselors, school nurses, and full-time teachers who are also coaches. The following roles are ineligible: principals, administrators, PTO members, teachers' assistants, paraprofessionals, student teachers, substitutes, part-time teachers, after-school teachers, or staff developers.* |
| 14 | * + I will consult with my principal during the development process, make any revisions requested, and obtain approval of the final version before posting the project. |
| 15 | * + I acknowledge that all items received via DonorsChoose will be owned by DISD, are not my personal property, and must remain with the campus/program described in the posted project. |
| 16 | * + I affirm that participation in this program will not result in unreasonable or hidden costs to the district and will not require extensive maintenance on the part of the district. |
| 17 | * + I will consult with Technology Services ahead of time for review of any proposed hardware/software/online components of my project. I will select only approved items for my DonorsChoose project. |
| 18 | * + I agree to fulfill all requirements and expectations outlined in the DonorsChoose plan, such as the student-generated Thank-you Package they expect. |
| 19 | * + If a parent has elected to not have their child’s picture used with any school event, I will not uploaded photos of those students. (Disregard permission form used within DC system.) |
| 20 | * + If my project is fully funded, I will notify the Assistant Superintendent for Finance by email. (Forwarding an acceptance notification message is sufficient.) |
| 21 | * + I have discussed publicity with my principal, and I will follow his or her recommendations for appropriate ways to seek donations for my project. I understand that the principal must pre-approve the publicity methods, along with the specific verbiage, to be used in any promotional efforts for this project. |

By signing this form, the teacher attests that the information provided herein is complete and accurate, and that the actual posting will contain only the ideas and plans documented here and/or discussed with the principal.

|  |
| --- |
| *PRINT TEACHER’S NAME* |
| *PRINT CAMPUS* |
| *TEACHER’S SIGNATURE* |
| *DATE* |

**Principal Acknowledgments and Signature**

|  |  |
| --- | --- |
| 23 | * + The teacher/applicant has confirmed that he or she has not already posted another DonorsChoose project this school year. |
| 24 | * + The teacher/applicant has fully explained this project to me. |
| 25 | * + The teacher/applicant informed me of all information needed to implement the project. |
| 26 | * + The teacher/applicant and I have discussed that all items obtained through DonorsChoose will be owned by DISD, are not the teacher’s personal property, and must remain with the campus/program as described in the submitted project. |
| 27 | * + I affirm that participation in this program will not result in unreasonable or hidden costs to the district and will not require extensive maintenance on the part of the district. |
| 28 | * + If this project has any technology aspect, I have discussed it with the teacher/applicant and Technology Services has approved the purchase. |
| 29 | * + I will oversee that the teacher/applicant complies with requirements outlined in the DonorsChoose procedures. |
| 30 | * + I have discussed with the teacher that uploaded photos must only show students for whom eSchoolPlus records document that parental authorization for release has been obtained. (Disregard permission form used within DC system.) |
| 31 | * + I have discussed publicity with the teacher and have provided recommendations for appropriate ways to seek donations for the project. I will pre-approve the publicity methods, along with the specific verbiage, to be used in any promotional efforts for this project. |

**Principal’s Decision**

|  |  |
| --- | --- |
| * + Approved |  |
| * + Denied | Reason for denial: |
|  |  |
|  |  |

|  |
| --- |
| *PRINT PRINCIPAL’S NAME* |
| *PRINT CAMPUS* |
| *PRINCIPAL’S SIGNATURE* |
| *DATE* |

***Teacher/applicant will scan this completed, signed packet and email it to*** [***rreid@denisonisd.net***](mailto:rreid@denisonisd.net) ***so that it can be added to the district’s records.***