

Partners in Education Annual Goal Agreement



School Year				
School:			Partner:	
Principal:			Site Director:	
PIE Contact:			PIE Contact:	
Address:			Address:	
Phone:			Phone:	
Email:			Email:	
	What type of support or services wou (School to comp		· · · · · · · · · · · · · · · · · · ·	
My Organization is capable of providing the following services and/or activities throughout the year; Please check each box indicating areas of support for your partner school. (Business Partner to complete this section)				
	<u>Donate Resources</u>		<u>Volunteer Time</u>	
	Donate services		Provide tutors/mentors	
	Donate supplies		Support teacher appreciation efforts	
	Donate food for events		Assist with beautification projects	
	Donate equipment for school		Proctor testing days in school	
	Provide student incentives		Serve on advisory committees	
	Sponsor special lunch/breakfast for teachers		Judge contest	
	Sponsor a school program (ex. F.U.E.L. or snacks)		Speak or participate in special events	
	Provide discounted services or incentives		Guest speakers	
	Fund a specific need or special project		Host field trips for students	
Other		Other		
E	stablish 3 <u>SPECIFIC</u> goals that will be accomplished th	nis year b	based on school needs and company abilities:	
1				
2				

Please be sure to make contact with partners at least twice a semester to discuss any changes in school needs, etc.