

TAHOE TRUCKEE UNIFIED SCHOOL DISTRICT
Gift/Donation Form

Donation is intended for: Distance Learning Support Department District-wide
Type of Donation: Check

I. DONOR'S NAME/ADDRESS: Excellence in Education, 11071 Donner Pass Road, Truckee, CA 96161

II. DONOR'S STATEMENT: (Please describe gift/donation in detail) You may use a separate sheet of paper if needed.

Funds to support distance learning for TTUSD

a. DESCRIPTION OF GIFT/DONATION

1. Estimated value or cost: \$20,000.00
2. Will donation be used for activities or instruction? YES NO
3. Will donation be used for before or after school activities or instruction? YES NO
4. Will donation be used for specific programs approved by the school Board? YES NO
5. Will donation be used only at a specific school site? YES NO
6. If this is a grant please attach a copy of the grant application YES NO

Please refer to Board Policy & Administrative Regulation 3290 for additional information

MAY 21 2020

➤ <u>(Signature on file)</u>	Date	All Schools	Date
Signature of Donor	Date	Signature of Principal/Administrator	Date

III. SUPERINTENDENT CHIEF LEARNING OFFICER RECOMMENDATION:

Before accepting any gift, the superintendent or designee has considered whether the gift:

- | | |
|---|---|
| 1. Has a purpose consistent with the district's vision and philosophy. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 2. Begins a program which the Board would be unable or unwilling to continue when the donated funds are exhausted. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| 3. Entails undesirable new or additional costs. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| 4. Adheres to BP 1325 regarding endorsement of business or product. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 5. Provides comparable educational opportunity for all students at all schools. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 6. Requires employment or compensation of personnel. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 7. Places unacceptable restrictions on educational or extracurricular programs or the school district. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| 8. Is inappropriate or detrimental to the best education of students. | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| 9. Meets any applicable federal, state or local and school district regulations/guidelines associated with its construction or use. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| 10. Meets current health and safety standards. | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |

➤ Superintendent CLO Robert Leri  Date MAY 26 2020

IV. Board Meeting Date: _____ Approved: [] Denied: []