

Troup County School System Partners in Education Partnership Agreement



Please Print

I, _____, on behalf of
(name)
_____, enter into this
(organization/business name)
partnership agreement on this _____ day of _____, 2018
in support of the Partners in Education program at _____
_____;
(school name)

I/We agree to contribute to the success of Troup County School System students and staff.

Program Goals

1. Support student achievement
2. Engage in the educational process
3. Maximize efficiency and productivity
4. Support a healthy learning environment

Business Support

As a Partner in Education, we agree to:

1. Offer the school available materials and/or financial resources to support student success
2. Serve as an advocate for the school in the community and workplace
3. Provide the school with human resources when available

School Support

As a Partner in Education, we agree to:

1. Provide a forum for consistent communication
2. Recognize the contributions made by the business partner as frequently as possible, i.e. school marquee, program/agendas, banners, thank you notes, etc.
3. Participate in PIE business sponsored programs and special events when feasible

Business PIE Member

Signature _____

Date: _____

This partnership is in agreement within the guidelines of the Troup County School System Partners in Education program.

Troup County School System Partners in Education Contact Form



Contact Information

Business Representatives

Date _____

Business PIE Representative _____

Telephone # _____ Email _____

Business Address _____ Bus. Ph. # _____

Alternate Business PIE Representative _____ Ph. # _____

Comments
