



# SPEND PLAN - CLASS FEE DISCLOSURE STATEMENT

School Year 20 23 - 20 24

Course Name Biology

Teacher Name Alicia Clarke

| Item                   | Description of Item Spend Plan  | Fee Amount | Revenue #<br>(Office Use) |
|------------------------|---|------------|---------------------------|
| Instructional Supplies | Consumable and Non-reuseable Equipment (chemicals, pipettes, specimen slides, food, etc.) | \$ 12      |                           |
|                        |   | \$         |                           |
|                        |   | \$         |                           |
|                        |   | \$         |                           |
|                        |   | \$         |                           |
|                        |   | \$         |                           |
|                        |   | \$         |                           |

Total Fee \$ 12

Add all items as outlined in maximum fee amounts from the approved Davis School District Fee Schedule with a description of each item and fee amount. \*\*include class fee, activity fee, transportation, apparel, etc. No other costs can be added after the approval is provided and disclosed to parent/guardians. The class fee must include everything a student would need to get an "A" from your class and no other material can be required to be purchased outside of this fee *\*unless a student and teacher agree on a project above and beyond the required included in this disclosure.* This approved Spend Plan should be posted/distributed to parents/guardians at the beginning of each year/semester for transparency purposes.

Teacher Signature: \_\_\_\_\_

Department Head Signature: [Signature]

Principal Approved Signature: [Signature]