



Old Rochester Tri-Town Education Foundation Fund

Signature of Approval Form

Please complete this form and have it signed by the building principal to include in your application.

Lead Grant Contact Name: _____

Lead Grant Contact Email: _____

Lead Grant Contact Position: _____

School Name: _____ Project Name/Title: _____

Brief Project Description: _____

Signature of Approval (building principal): _____

Today's Date: _____