

TAHOE TRUCKEE UNIFIED SCHOOL DISTRICT
Gift/Donation Form

Donation is intended for: School STEPP Department Early Learning Type of Donation: Monetary

I. DONOR'S NAME/ADDRESS: Nevada County Supt of Schools

II. DONOR'S STATEMENT: (Please describe gift/donation in detail)

This is a grant for the participation in Quality Counts California. This is for quality improvements in the STEPP infant/toddler program.

a. DESCRIPTION OF GIFT/DONATION

- 1. Estimated value or cost: \$ 5,200.00
- 2. Will donation be used for activities or instruction? YES [] NO [x]
- 3. Will donation be used for before or after school activities or instruction? YES [] NO [x]
- 4. Will donation be used for specific programs approved by the school Board? YES [x] NO []
- 5. Will donation be used only at a specific school site? YES [x] NO []
- 6. If this is a grant please attach a copy of the grant application YES [] NO [x]

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

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

<p>➤ <u>Keroun Kramer</u></p>	<p><u>OCT 5 2023</u></p>
Superintendent	Date

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