**Art in Our Schools Program**

School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Person \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Daytime Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**-------------------------------------**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **RESIDENCY** **SCHEDULE** | **MONDAY** | **TUESDAY** | **WEDNESDAY** | **THURSDAY** | **FRIDAY** |
| **FIRST**  **CLASS**  **A.M.**  **Please give a brief outline of your schedule information on this page.**  **Include the following schedule information in the Project Description section of your grant application form:**  •Teacher’s name  • Grade level  • Class meeting time  • Room number  • Number of students  • Any special concerns  or class topics |  |  |  |  |  |
| **SECOND**  **CLASS**  **A.M.** |  |  |  |  |  |
| **THIRD**  **CLASS**  **P.M.** |  |  |  |  |  |
| **FOURTH**  **CLASS**  **P.M.** |  |  |  |  |  |
| Please note **in-service workshop time** and describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |