

**RESPRO  
AREA III REGIONAL SYSTEM OF SUPPORT PROVIDER**

**2009-2010 RESPRO SERVICE/RESOURCE PROPOSAL REQUEST FOR DISTRICTS/BUILDINGS**

**SEMESTER 1      SEMESTER 2      SUMMER/JUNE**

Requisitioner's Name and Position:	
District Name and Number:	Building:
Title I District:    Yes    No	Title I Building:    Yes    No

SERVICE/ACTIVITY REQUESTED (RESEARCH-BASED, SYSTEMIC, SUSTAINABLE, DATA POINTS)	DATE(S) OF ACTIVITY <u>MUST BE COMPLETED</u>	# OF EDUCATORS	DISTRICT/ BUILDING FUNDING CONTRIBUTION	RESPRO FUNDING NEEDED	TOTAL COST

TOTAL REQUESTED AMOUNT \$ \_\_\_\_\_

**MUST Complete Chart for Proposal to be Reviewed**

Subgroup in AYP Status <span style="float: right;">⇒</span>				
Reading % Does Not Meet				
Math % Does Not Meet				

**In order to receive expenditure authorization**, please attach documentation to support the amounts requested. This may include copies of consultant contracts, district stipend amounts, resource costs, service provider price quotes, etc. Approved service expenditures are reimbursed to the district, not the buildings. **No reimbursements can be made from RESPRO funds without prior authorization.**

SIGNATURE OF AUTHORIZED SUBMITTER: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE OF RESPRO COACH: \_\_\_\_\_ DATE: \_\_\_\_\_

- Amount Approved    \$ \_\_\_\_\_  
 Amount Not Approved    \$ \_\_\_\_\_   
  Insufficient Information   
  Inaccurate Information   
  Needs Local Contribution   
  Other \_\_\_\_\_

RESPRO Coordinator's Signature \_\_\_\_\_ Date \_\_\_\_\_