



### Applying to Participate

1. Read completely before completing the attached form. Incomplete forms will delay the processing of your request. Remember to write neatly and clearly.
2. "District Name" and "District Number" - provide both. If you are a public or charter district but are under an organizational umbrella (ex. Urban League) enter that information otherwise leave blank.
3. "Address" - Provide both the street address and mailing address if they differ. Materials cannot be sent to a P.O. Box.
4. "Primary Contact" This is the person the GR Outreach Coordinator will work with to send materials, schedule training, answer questions, etc.
5. "Anticipated Start Date" – this is the date we will use in scheduling the delivery of program materials. Select only one.
6. "Orientation Training"- Ideally all staff using the GetReady program should participate in the orientation training. We realize that it is not always possible to get everyone together, minimally the primary contact person needs to be trained with the expectation that s/he will in turn train site staff.
7. "Type of institution/program" -Indicate if you are an organization, charter or magnet school. NOTE: If an organization is going to use volunteers to administer the program, the organization leadership must complete the form.
8. "Past Participant" – If you have *never* participated in GetReady Outreach please enter: "0". If you have but stopped and are coming back, enter the total accumulated years of participation.
9. "# of Participating Students" – Indicate the number per grade
10. "# of Student Materials" – should correspond with the number of participating students. The number of student materials will be based on the number entered. If you know you have a high transient student population, if you have 7 on your roster, you may want to round up to 10.
11. "Grade Using" – which grade will you be using the topic with. We identify grades a topic is 'typically used with – we know that there are sites with combined grades, ELL students or other factors. Ex. If you have 4<sup>th</sup> graders that you will be using "What Will I Be?" enter 4<sup>th</sup> .
12. "Federal Requirements" – the percentage may be based on the entire site or a target population.
13. Once you have completed the attached form send to: Outreach Associate, Get Ready, 1450 Energy Park Drive, Suite 350, St. Paul, MN 55108 Fax (651) 642-0675



**OUTREACH MINNESOTA  
PARTICIPATION FORM  
2012-2013**



Name of School: \_\_\_\_\_

District Name: \_\_\_\_\_ District Number: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

Primary Contact Name \_\_\_\_\_ Role at School: \_\_\_\_\_

Contact Telephone #: \_\_\_\_\_ Contact Fax #: \_\_\_\_\_

Contact E-mail Address: \_\_\_\_\_

Best way to reach you? Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Anticipated start time: Fall (Sept/Dec) \_\_\_\_\_ Spring (Jan/May) \_\_\_\_\_ Summer (June/Aug) \_\_\_\_\_

Which month would you like to have your staff orientation training? \_\_\_\_\_

Check all that apply:  Organization  Charter  Magnet  Past Participant \_\_\_\_\_ Years

Names and E-Mail Addresses of Participating Teachers (If needed, list additional teachers on back):

NAME	E-MAIL	GRADE(S)	#Classes Taught

# of Participating Students: 4<sup>th</sup> GR: \_\_\_\_\_ 5<sup>th</sup> GR: \_\_\_\_\_ 6<sup>th</sup> GR: \_\_\_\_\_ 7<sup>th</sup> GR: \_\_\_\_\_ 8<sup>th</sup> GR: \_\_\_\_\_

Title	# of Student Materials	Grade Using
<i>What Will I Be?</i> (Typically used with 4 <sup>th</sup> graders)		
<i>Great College Mystery</i> (Typically used with 5 <sup>th</sup> graders)		
<i>Financing Your Future</i> (Typically used with 6 <sup>th</sup> graders)		
<i>Future Choices</i> (Typically used with 7 <sup>th</sup> /8 <sup>th</sup> graders)		
<i>Within My Reach</i> (use with 7 <sup>th</sup> /8 <sup>th</sup> graders if used Future Choices last year)		

**Federal Requirements:**

Free or reduced price meals.....Percentage of school on free or reduced lunch: \_\_\_\_\_%

ELL Students.....Percentage of school that are ELL students: \_\_\_\_\_%

Does your school receive Title 1 services? Yes No

I certify that the information I have provided is complete and correct to the best of my knowledge. By signing this application, the school listed above will participate in Get Ready and will turn in all appropriate documentation.

\_\_\_\_\_  
Contact Signature

\_\_\_\_\_  
Date

For Office Use Only

RVCD:	OT:	SV:	PD:	FT:
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