2022-2023 Operation Aware Program Request Form (Grant Supported)

District _____ School _____
Address _____ City _____
Zip _____
Phone _____ _____
Principal _____ Email _____
Counselor _____ Email _____
Person to contact regarding scheduling _____
Email _____
Person to contact regarding billing _____
Email _____

Program preference: Please choose the three most convenient quarters for Operation Aware to be in your classroom. Write #1 in the blank for your first choice, #2 for your second and #3 for your third preference. We will do our best to schedule your first choice. We schedule on a first come first served basis.

Quarter	Begins	Ends	Preference
1st	August	October	
2nd	October	January	
3rd	January	March	
4th	March	May	

**** The grant this year is covering Virtual Classes. All lessons will be sent via video links to participating schools. Teachers and students will have access to the links for the entire quarter.****

Number of classes: Please fill in the number of preferred classes (sections) you desire to participate for the year in the box below the requested grade(s). We will do our best to cover your request with our allotted funding and let you know the final determination of what class we can cover.

GRADE	4	5	6	7	8	9	10	11	12
# of classes participating									

Day and time preferences: Please choose the three most convenient days and times for Operation Aware to be in your classroom. Write #1 in the blank for your first choice, #2 for your second and #3 for your third preference. We will do our best to schedule your first choice. We schedule on a first come first served basis.

Monday	Tuesday	Wednesday	Thursday	Friday
AM	AM	AM	AM	AM

PM	PM	PM	PM	PM

School Hours: Please tell us the times your school days begin and end.
Begin:_____ End:_____

Please return this form to the Operation Aware office at your earliest convenience. Funding will be determined based on the number of classes requested, the way the classes are scheduled, and the distance the school is from our office. For questions please contact Amber Powell by email amber@operationaware.org.

Please Email this form to Mackenzie Staples - Director of Programs at: mstaples@operationaware.org
www.operationaware.org