



APPLICATION FOR SCHOOL-BUSINESS PARTNERSHIP

In accordance with Nebo School District Policy #KACA – School Advertising Restrictions, this form must be completed, signed by an individual or authorized representative of an entity seeking to partner with Nebo School District, and submitted to the appropriate school for approval.

Name of Individual/Entity: _____ Date: _____

Address: _____

Authorized Representative: _____ Phone: _____

Identify the Utah Core Standards and/or Objectives to be satisfied by the partnership:

Describe the responsibilities of the applicant, including services and/or products to be offered, and how those services/products will satisfy the Utah Core Standards/Objectives identified above:

What is the anticipated duration (not to exceed three years) of this partnership?

Applicant – Print Name

Applicant – Signature

Date

This application for school-business partnership is Accepted (This partnership may be terminated without recourse at any time and for any reason at the discretion of the District) or Denied.

Administrator – Print Name

Administrator – Signature

Date