

**SUGGESTED SPENDING PLAN FORMAT
FOR
CLASSROOM SUPPLIES, INSTRUCTIONAL MATERIALS AND
EQUIPMENT**

TEACHER'S NAME: _____

School District: _____

School: _____

School Year: _____

Allocation Amount Per Teacher: \$ _____

TOTAL AMOUNT TO CARRY OVER: \$ _____

1. Teachers must briefly describe the type of classroom supplies, instructional Materials and equipment, computers or computer software to be purchased. Note: The principal may require a detailed list of items for approval. Add Pages as necessary.

2. The spending plan must be submitted to the principal for approval. The principal Must complete the approval section below.

Principal's Approval: YES _____
NO _____ (MUST BE ABLE TO DEMONSTRATE REASON)

Reason for Disapproval (Check the appropriate response and briefly explain if the plan is disapproved.)

____ a. Plan does not support the overall goals of the school

____ b. Plan includes unallowable items

____ c. Plan exceeds total funds available to teachers

Principal's Name: _____ Date: _____

Principal's Signature _____

Teacher's Signature _____