

# GLEN RIDGE PUBLIC SCHOOLS

## GIFT FORM

1. Organization/group/individual donating gift \_\_\_\_\_
2. Type of gift (please include the dollar value of the gift) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  - a. If a monetary donation, is the check attached? \_\_\_ Yes \_\_\_ No \_\_\_ N/A
  - b. Does the gift include/require installation? \_\_\_ Yes \_\_\_ No (if yes, please complete #3)
  - c. Is the installation cost included in the cost of the gift? \_\_\_ Yes \_\_\_ No \_\_\_ N/A
  - d. Is the quote attached? \_\_\_ Yes \_\_\_ No \_\_\_ N/A
3. Installation requirements (please include cost of installation if it is above and beyond the cost of the gift). \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  - a. Who is responsible for the additional cost? \_\_\_\_\_
  - b. Who will install the gift? \_\_\_\_\_
4. Are there continued/recurring costs? \_\_\_\_\_
  - a. Will there be a Maintenance Contract cost? \_\_\_ Yes \_\_\_ No If yes, please indicate amount & specifics \_\_\_\_\_
  - b. Will there be training costs? \_\_\_ Yes \_\_\_ No If yes, please indicate amount & specifics \_\_\_\_\_
  - c. Will there be a cost for additional materials? \_\_\_ Yes \_\_\_ No If yes, please indicate amount & specifics \_\_\_\_\_
5. What school official did you discuss this gift with? \_\_\_\_\_
6. What school program will this gift enhance? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Business Administrator's Signature                      Date

\_\_\_\_\_  
Principal/Administrator's Signature                      Date

\_\_\_\_\_  
Superintendent's Signature                      Date

\_\_\_\_\_  
Board Approval Date