Assurance/Signature Page 2014 – 2015

School District:	
School:	
Address:	
City:	
Phone:	
Email:	
Superintendent:	
Principal/Project Manager	
Fiscal Manager:	
Team Coach/instructor:	
Assurances:	
1. Grantee shall use funds to support activities related to support of C	CyberPatriot teams
2. Grantee agrees to carry out the project as described in the applicat	ion and program description.
Superintendent Name (print)	Date:
Superintendent Signature	
Principal/Project Mgr/Coach Name (print)	Date:
Principal/Project Mgr/Coach Signature	