CULMINATING PROJECT OUTLINE

Student Name: ___________________________________ Student # ________________

Home Phone: ________________________________ Email: _________________________

School Year _______ Beginning Date _________ Anticipated Completion Date ________

On a separate sheet of paper, please address the questions/statements on this form. Attach the completed summary to this form and submit to your Project Coordinator/teacher.

1. Describe your project. What will you do or what problem will you solve? How will you extend your knowledge and skills?

2. Identify the specific objectives of your project. What you will know and be able to do as a result of the project?

3. List the steps you will take to complete your project.

4. Does your project involve raising money (auction, charity, donations, fees, etc.)?  No☐ Yes☐

   If yes, complete the Culminating Project Checklist listed on the reverse side.

   If no, submit to teacher for review.

☐ Approved

☐ Denied       Reason_____________________________________________________

_____________________________________________       __________
Teacher                                          Date
CULMINATING PROJECT- Checklist for Projects Which Involve Money

If a student chooses to raise money as a part of the culminating project, the student has additional responsibilities and guidelines to meet. The checklist below must be completed and approved by the teacher PRIOR to the start of the project.

“Raising money” may include but is not limited to: auctions, penny drives, donations at the door for an event, charitable events, etc.

1. Identify the **TYPE** of activity

2. Identify the intended **BENEFICIARY** and ensure it meets the following criteria:
   - Local, within the Tri-Cities, charity with 501 (3c) status AND
   - Local official representative willing to be present at the event
     - Name of Charity ____________________________
     - Name of Representative ______________________
     - Contact Phone Number _______________________
     - Contact Email Address _______________________
     - Mailing Address _____________________________

3. Identify the following **NEEDS**:
   - Equipment __________________________________
     ____________________________________________________________________________________
   - Facility ______________________________________
   - Materials ____________________________________
   - Time ________________________________________
   - Cost ________________________________________

Do NOT make any verbal or written commitment to purchase anything.
Charitable fundraising is a private activity and district (public) funds shall not be used to offset, front-fund or pre-pay expenses. This includes start up costs.

4. F-9 and F-10 are signed and dated by teacher BEFORE continuing with project.

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**Teacher Verification of Beneficiary**

_________________________________________       ____________
Teacher Signature                        Date

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