



# 2016-17 Fund Reservation Form

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**PURPOSE**

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This form is to be used if your school intends to apply a portion of your Right Brain funds (**up to \$2 per student**) to support teachers' involvement in planning.

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**INSTRUCTIONS**

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Submit this document in the Fall to ensure that funds will be available when invoices from your district are processed. You don't have to tell us exactly how much you'll use, but it is better to over-estimate than under-estimate.

School Name: \_\_\_\_\_ Date: \_\_\_\_\_

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**AMOUNT REQUESTED TO BE RESERVED**

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\$ \_\_\_\_\_

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**THESE FUNDS WILL BE USED FOR (SELECT ALL THAT APPLY)**

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- Substitutes for planning meetings with artists
- Extended contract pay for a teacher coordinating Right Brain at school
- Other (provide a brief description):

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**SCHOOL CONTACT FOR QUESTIONS ABOUT THESE RESERVED FUNDS**

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Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

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**AUTHORIZATION**

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Principal's Signature \_\_\_\_\_

Date \_\_\_\_\_

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**SUBMIT COMPLETED FORM TO**

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