

# Cardinal Pride Association Proposal Form

Teacher Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Item Requested:

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Item Description:

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Item Cost: \_\_\_\_\_

How will this item support our students and their families?

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Requesting Teacher: \_\_\_\_\_

Date: \_\_\_\_\_

If technology,  
Director of Technology Approval: \_\_\_\_\_

Date: \_\_\_\_\_

Building Principal Approval: \_\_\_\_\_

Date: \_\_\_\_\_

Superintendent Approval: \_\_\_\_\_

Date: \_\_\_\_\_

Cardinal Pride President: \_\_\_\_\_

Date: \_\_\_\_\_

***The Cardinal Pride Association is dedicated to helping the New Bremen School by providing support for students and their families through communication and resources for classroom teachers, the schools and the district.***