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**Applications will not be considered without the Principal’s signature. Title I Schools will receive priority consideration. Send completed applications to** [**fefehandy@ptmgl.com**](mailto:fefehandy@ptmgl.com)**.**

Elementary/Middle/High School:

County/District:

Representative’s Name:

Principal’s Name:

Phone: Email:

**Description of the Program & School Benefits:**

* Participation in the Page Turners’ in-school book club
* Books
* Virtual Author’s Visits
* Professional Learning: Workshop Including Resources
* Teacher/Leader Mentor Support

**Elementary school representatives, please rank your grade level preference (e.g., #1 or #2).:**

4th grade:

5th grade:

**We will partner with 2 Middle and 2 High Schools this year!**

If your Elementary School is selected as a partner school, we will inform you of the grade level designation. Middle/High School designations are not grade-level specific.

**Please place initials beside each statement. I AGREE to:**

fully comply with the program model and protocol;

attend PTGML’s debrief session;

provide STAR data at the beginning and mid-year;

implement and submit an online student survey;

check in with our assigned PTMGL Teacher Leader Mentor; and

have a social media presence and provide periodic updates with

photos and videos tagging @PTMGL (via Twitter).

**The partner school fee is $2,500.**