



Gainesville City School System Partners in Education Agreement

Business/Organization Name: _____

Type of Business/Industry: _____

Contact Person: _____ **Title:** _____

Business Mailing Address: _____

City, State, Zip Code: _____

Phone: _____ **Email:** _____

Fax: _____ **Web Address:** _____

Approximate Number of Employees: _____

Does your business/organization wish to partner with one school, multiple schools, or the school district?

- Partner with one school only
- Partner with multiple schools
- Partner with GCSS school district

What school or schools do you wish to establish a partnership? (Check all that apply)

- Centennial Arts Academy
- Enota Multiple Intelligences Academy
- Fair Street International Academy
- Gainesville Exploration Academy
- Mundy Mill Learning Academy
- New Holland Knowledge Academy
- Gainesville Middle School
- Gainesville High School
- Gainesville City School System (district)

What resources are you willing to provide as a partner? (Check all that apply)

- Discounts
- Financial Assistance
- Equipment
- Supplies
- Services
- Staff Volunteers
- Other: _____

What development services can you provide? (Check all that apply)

- Offer Student Internship/Apprenticeship Opportunities
- Participate in Career Day or Career Exhibitions
- Exhibits or Booths at School or District Events
- Provide facility tours for student field trips
- Sponsor Staff Seminars (time management, wellness, leadership training, etc.)
- Sponsor Youth Education seminars
- Other: _____

What special incentives are you interested in providing? (Check all that apply)

- Display student work at your business/industry
- Judge school contests or competitions
- Provide free training or lessons
- Sponsor awards or prizes for students
- Sponsor awards or prizes for parents
- Sponsor awards or prizes for staff
- Sponsor a special interest group (ex. Student government, yearbook, chorus, running club, robotics team, etc.)
- Other _____

Please list additional contributions that will be provided by the business or organization: _____

Does your business or industry discard or have surplus materials and/or equipment that may be used by a school?

- Yes
- No

If yes, please list materials or equipment;

Does your business or organization offer an educator's discount?

- Yes
- No

If yes, please provide details? _____

The partnering school(s) or school district has agreed to the following: (Check all that apply)

- List business partner on school website
- List business partner on school banner
- Recognize partner in school newsletters or publications
- Distribution of flyers or handouts to students, parents or employees (Limit: Two distributions per school year) (Note: Religious-based advertisement can only be placed in a designated location in the school for voluntary pick-up only.)
- Other: (Please specify)

The Partners in Education agreement is effective for three consecutive years with the option of the school(s), business/organization partner, or Gainesville City School System to modify or terminate the agreement at any time.

Effective Date of Agreement: _____

Ending Date of Agreement: _____

Business Partner Contact Name: _____

Business Partner Contact Signature: _____

Date: _____

*School PIE Contact: _____

School PIE Contact Signature: _____

Date: _____

***Note: If partnering with multiple schools, then School PIE Contact information does not need to be completed. A list of the PIE coordinators will be provided to the partner and the agreement will be shared with all participating schools.**

GCSS PIE Contact Coordinator: Lynn O. Jones

GCSS PIE Contact Signature: _____

Date: _____