

**Harrison Public School Foundation  
Grant Review by Principal or Supervisor**

**Project** \_\_\_\_\_

**Teacher** \_\_\_\_\_

**School** \_\_\_\_\_

**Beginning and Ending Date of Project** \_\_\_\_\_

**Were a sufficient number of students involved in the project to warrant the expense incurred?** \_\_\_\_\_

**Strengths and areas of possible improvement of the project** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Would you recommend the replication of this project to other school buildings within the district?** \_\_\_\_\_ **How can the project best be replicated?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**Signature of person completing form**

\_\_\_\_\_  
**Date**