## DEPARTMENT OF SPECIAL SERVICES Township of Union Public Schools M-E-M-O-R-A-N-D-U-M

TO:

Greg Tatum

cc:

Julia Vicidomini, Diane Cappiello

FROM:

Laura Damato

RE:

Board Agenda

DATE:

October 3, 2017

Approve the following school applications for:

Play Unified 2017-2018 Grant, Special Olympics

Jefferson School

Thank you for completing a submission for the "2017 - 2018 Play Unified Grant" application. Below is a copy of your response:

Submitted on: 09/04/2017 10:14:57 PM

(1/10)

By initialing below, I am stating I have read, agree to follow and enforce the above information and/or guidelines. S.F

(2/10)

By initialing below, I am stating I have read, agree to follow and enforce the above information and/or guidelines. S.F.

(3/10)

By initialing below, I am stating that I have read, agree to follow and enforce the above information and/or guidelines. S.F.

(4/10)

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(5/10)

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(6/10)

By initialing below, I am stating I have read, agree to follow and enforce the above information and/or guidelines. S.F.

(7/10)

By initialing below, I am stating I have read, agree to follow and enforce the above information and/or guidelines. S.F.

Full Name of Person Completing Form: Samantha Formica

Email: Sformica@twpunionschools.org<mailto:Sformica@twpunionschools.org>

(8/10)

Application Type: School

Application Duration: One Year

District Information

District Name: Township of Union

Contact Information First Name: Kim Last Name: Conti

Email: Kconti@twpunionschools.org

Phone: 9088514426

Title/Position: Director of Special Services

School Information

Name of Schoo: Jefferson Elementary School

School Address: 155 Hilton Ave

City: Vauxhall Zip Code: 07088

School Level: Elementary Demographics: Urban

Number of Years as a Play Unified School: 2

School Enrollment: 600

School Leadership Team Primary Contact (Liaison) First Name: Samantha Last Name: Formica

Email: Sformica@twpunionschools.org

Phone Number: 9732244543

Title/Position at School: Special Education Teacher

## - School Liaison

Principal

First Name: Laura Last Name: Damato

Email Address: Ldamato@twpunionschools.org

Athletics/P.E. Member First Name: Greg Last Name: Fry

Email Address: Gfry@twpunionschools.org

Special Services Member

First Name: Rosa Last Name: Teixeira

Email Address: Rteixeira@twpunionschools.org

Additional Member(s) First Name: Ashley Last Name: Prata Phone: (908) 265-1424

Email: Aprata@twpunionschools.org Title/Position: - Secondary Club Adviser (9/10)

**Initiative Descriptions** 

School Project Description

School Name: Jefferson School

- 1. Which Special Olympics initiatives will be implemented in your school/district? Please check all initiatives you plan to implement. The appropriate school level(s) is found in parentheses.
- Junior Division Sports (GRADES 3 6) (Elementary/Middle schools)
- Club Fundraising (ALL schools)
- Play Unified Club Recreation (ALL schools) Please check which Junior Division sports you will implement in your school/district. Please check all that apply:
- Basketball (February March 2018)

Please check which Play Unified Club Recreation initiatives you will implement in your school/district. Please check all that apply:

- School Unified Game Day

(10/10)

Coach Stipends

Total Amount Requested - Coach Stipends -0

**Adviser Stipends** 

Total Amount Requested - Adviser Stipends - 0

Transportation

Total Amount Requested – Transportation - 500

**Facility Rental** 

Total Amount Requested - Facility Rental - 0

Faac

Total Amount Requested - Fees - 0

Supplies

Total Amount Requested - Supplies - 200

T-shirts

Total Amount Requested - T-shirts - 0

Equipment

Total Amount Requested - Equipment - 0

Posters or Banners

Total Amount Requested - Posters or Banners - 0

Water/Snacks

Total Amount Requested - Water/Snacks - 300

Uniforms

Total Amount Requested - Uniforms - 0

**Program Cost Share** 

Total Amount Requested - Program Cost Share - 0

Total Amount Requested

1000