



Hawai'i State Foundation on Culture & the Arts
Artists in the Schools Program
Partnership Grant Application Form
2016-2017



SIGNATURE FORM

School Name: _____

Principal Statement of Support

I approve of this final partnership application, including Budget, and if the partnership receives an AITS grant, I certify that my school will contribute 10% of the AITS grant amount received, in cash (not in-kind), towards residency expenses. I will thank the representative(s) and senator(s) from the school's district in writing (cc: HSFCA) and invite them to observe some part of the residency. I understand that a one-hour professional development session with the artist is required for the residency teachers.

Principal's Signature

Date

Principal's Printed Name

Additional Comments: