THE SCHOOL DISTRICT OF PALM BEACH COUNTY
OFFICE OF COMMUNITY INVOLVEMENT

Business Partnership Agreement

This agreement is completed by the school/department administrator or liaison. Print the form after completion and choose submit in the drop down menu at the bottom of the form. Click Go to submit data to the Office of Community Involvement. DO NOT CLOSE the form until you have printed and submitted the form. The principal/director and business organization sign the printed copy and the school keeps the original.

SCHOOL/DISTRICT OFFICE

Designated School or Department Number _____ Name _____

Administrator _____ Liaison _____

Address (street, city, state, zip) _____

Phone _____ FAX _____ E-mail _____

BUSINESS/ORGANIZATION PARTNER

Business or Organization Title _____

Contact _____ Title _____

Address (street, city, state, zip) _____

Phone _____ FAX _____ E-mail _____

BUSINESS PROJECT OR ACTIVITY

What type(s) of partnership support will this partnership provide (check all that apply)

- ☐ Increase Academic Achievement - Read to students, tutor, provide technical expertise, display student work
- ☐ Enhance the Learning Environment - Mentor students, provide time for employees to volunteer, field trips
- ☐ Career awareness - Offer job shadowing, internships, career fair or career day, career materials
- ☐ Take an Advisory Role - Be a member of a School Advisory Council, participate on a curriculum committee
- ☐ Faculty or Staff Development - Invite teachers to in-house training seminars, provide job shadowing for teachers
- ☐ Donor / Sponsorships - Donate supplies or equipment, scholarships, sponsor events or field trips

Other _____

RECIPROCAL ACTIVITY

What type(s) of school mutual activities will this partnership provide (check all that apply)

- ☐ School T-shirt & spirit items
- ☐ Musical performances for partner
- ☐ Communication of school events
- ☐ Notes from students
- ☐ Appreciation programs
- ☐ Recognition on marquee, newspaper, web site, etc.
- ☐ Assist with company special events
- ☐ Invitations to special school programs
- ☐ Free tickets to school events & programs
- ☐ Specific feedback regarding impact of partnership on students and school
- ☐ Display of recognition banner consistent with policy 7.151. By signing below, the business partner acknowledges receipt of a copy of policy 7.151, represents that he/she has read and understood it and specifically acknowledges and agrees to the provisions of paragraphs 2.B. and 2.C.

Other _____

The above business (organization) and educational facility do hereby agree to create an educational partnership which will enhance and improve the quality of education and meet the needs of the students, educators, and the community.

_____ _____

Signature of Business Partner *Date* *Signature of Superintendent or Principal* *Date*

PBSD 1570 (Rev. 9/27/2010) ORIGINAL - School Office COPY - Business Partner COPY - District Business Partnership Coordinator