

AAPT/PTRA COST-SHARING DOCUMENTATION FORM

Location and Date of AAPT/PTRA Workshop: _____

Name(s) of AAPT/PTRA Workshop Leader(s): _____

Name of Individual Validating Cost-Sharing: _____

Title of Individual Validating Cost -Sharing: _____

Signature of Individual Validating Cost-Sharing: _____

_____ (Date Signed)

This form is used to list the source, type, and amount of any in-kind supplementary cost-sharing funds (i.e., funds not provided by the Federal or State grant funds). If possible attach this AAPT/PTRA Cost-Sharing Documentation Form to a school or cooperate letterhead, and mail to AAPT, One Physics Ellipse, College Park, MD 20740-3845. Cost sharing can be attributed to:

- A college or university (e.g., use of building, use of computers and/or equipment, staff time, et cetera),
- A company (e.g., travel expenses, use of building, equipment loan & shipping, training, staff time, reduced cost of products, et cetera)
- A school system/district (e.g., substitute, use of building, use of computers and/or equipment, teacher training funds, et cetera),
- An individual (donation, time, travel expenses, et cetera)

To validate any cost-sharing support, AAPT/PTRA needs this form completed with the name, title and signature of an individual, or a school or cooperate official.

Type of Cost-Sharing	Source of Cost-Sharing	Cost-Sharing Value ¹
Reduced Cost of Product		\$
Staff Development Funds		\$
Staff Time (Name: _____)		\$
Substitute Teacher Payment		\$
Use of Building or Facilities		\$
Use of Computers		\$
Use of Laboratory Equipment		\$
Other:		\$
Other:		\$
Other:		\$
Other:		\$
TOTAL =		\$

¹ Cost should reflect commonly available amounts for geographic area and type of support.