

OBJECTIVE FOR TITLE PURCHASE

Please fill out this form and submit with your quote for any Title supply requests. The more descriptive the better we can help accommodate your school with this purchase. For more information about the Federal Guidance of these funds, you can visit: <https://www.nj.gov/education/nonpublic/federal/>

School Name: _____

Today's Date: _____

PURCHASE USING TITLE I PARENTAL INVOLVEMENT: This purchase has to be an extension of an activity, training or event that was given to parents to help with their child.

- What parent/family engagement activity, training, or event does this purchase support?

- Does this purchase support meaningful 2-way communication parent and families? _____
- What is the **act** of participation between both family/parent and the Title student?

- What is the **activity/event/parent training** that this purchase will support for the family/parent and the Title student?

PURCHASE USING TITLE III:

- Does this purchase involve supporting supplemental language instruction for English Language Learners?

- What is the primary instructional goal that this purchase will support?

PURCHASE USING TITLE IV:

- What is the objective of this purchase: (check one)
 - To support well-rounded education
 - To improve the use of technology
 - To provide safe and healthy schools
- What is the need expected to be supported through this purchase?

- What is the program that this purchase will provide supplemental support for the Title student(s)?

