



# 2011-2012 "My School's Cool" Application

## SCHOOL INFORMATION

School Name:

Mailing address:

City:

State:

Zip Code:

Physical address:

City:

State:

Zip Code:

Phone:

Fax:

\*E-mail:

## SCHOOL CONTACT INFORMATION

School Coordinator:

Phone:

Fax:

\*E-mail:

Principal:

Phone:

Fax:

\*E-mail:

## ENROLLMENT INFORMATION

Type of School: (circle one) Elementary Middle High Combined Campus  
Private

Total number of Students enrolled for current school year:

Number of Teachers employed for current school year:

**\*Mandatory in order to communicate quickly, effectively and to save trees!**



## School Accountability

### Coordinator

Each school will be required to designate a School Coordinator to participate in the program which the Mall Coordinator will work to collect points for your school throughout the entire length of the program. It is a requirement that the coordinator has an email address and be readily available to speak with the Mall Coordinator. The School coordinator will perform the following tasks:

- Providing monthly updates to the school on their point standing
- Providing school enrollment and tax id information
- Distributing information to schools, parents and students pertaining to the program i.e., extra credit opportunities, monthly newsletters, school bulletin board updates
- Coordinating any required school research
- Attendance at MSC kickoff meeting and other meetings designated by the Mall Coordinator

### Promoting Honesty and Integrity

Because My School's Cool is based on a system where parents, teachers, students and shoppers will earn points for their school, it is imperative that each school convey the importance of honesty. There will be situations throughout this program where individuals could earn points in a dishonest manner by turning in duplicate receipts which we are unable to track. We are counting on the School Coordinator, principal and teachers to set an example for students and encourage everyone to simply be honest.

## “My School’s Cool” Accountability Contract

School Name: \_\_\_\_\_

Principal: \_\_\_\_\_

Coordinator: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_