



BEGINNING TEACHER NETWORK FINAL REPORT

EDUCATION STANDARDS AND PRACTICES BOARD
SFN 60433 (06-2017)

Send completed report to:
Erin Jacobson
2718 Gateway Ave., Suite 204
Bismarck, ND 58503
Email: ecjacobson@nd.gov
Fax: 701.328.9647

Final report is due at 4:00pm on May 31st

Name of Beginning Teacher Network		
Name of Grant Coordinator		
Mailing Address for Payments		
City	State	ZIP Code

Documentation needed for final payment:

- A final list of all activities carried out under the grant. Please include artifacts such as meeting schedules, communications, etc.
- Documentation of Network evaluation results
- A brief Grant Coordinator's evaluation of Network activities and "lessons learned" this year.
- Any suggestions you have for the ND Teacher Support System as we plan for the future
- All Meeting Sign-in Sheets
- Completed and Signed *Final Reporting Form*

Summary – Final Payment

Total Facilitator and Presenter Expenses (from page 2)	\$
Total Meeting Expenses (from page 3)	\$
Subtotal of Expenses	\$
Plus 5% District/REA Administration Fee	\$
Total Expenses	\$
Total Amount of Approved Funds from the ND Teacher Support System (TSS)	\$
Minus Grant Funds Previously Received	\$
Amount of Final Payment Requested	\$

For Use by Teacher Support System
APPROVED FOR TEACHER SUPPORT PAYMENT
DATE:
CODE: 609

Numbers Served

Number of first-year teachers who attended only one session	
Number of first-year teachers who attended more than one session	
Total number of first-year teachers who participated in program	

Submittal Information

Beginning Teacher Network Name	Date Submitted
Grant Coordinator Name	Signature
Fiscal Agent/Business Manager Name	Signature

Facilitator and Presenter Expenses

Person Paid	Service Provided	Date of Service	Amount Paid	Date Paid
			Total =	

Meeting Expenses

Meeting Date	Item (ex. food, copying)	Paid to Whom	Amount Paid
Total =			