



CAP Adopt-a-Classroom Program Request for Collaboration

Date of Request: _____

Charter Number & Name of Squadron: _____

CAP PoC: Squadron Commander or AEO Name and Rank:

School Name, Physical Mailing Address (Not P.O. Box), and Phone # for Shipping:

Teacher Name and Grade: _____

of students in class: _____ # of females _____ # of males _____ Title 1 School ___ yes (Y) ___no (N)

of each: American Indian/Alaska Native _____ Asian _____ Black/African American _____

Hawaiian Native/Pacific Islander _____ Hispanic/Latino _____ White/Caucasian _____

Two or more races _____ Other info _____

The squadron POC hereby submits to adopt@capnhq.gov this fully complete request for collaboration to conduct an educational program for the students during the current school year. This collaboration will involve:

- 1- Squadron support to the teacher (in person or virtually) by:
 - a. having CAP adults and cadets teach at least 3 of the offered CAP lessons to the students;
 - b. planning additional demos and/or speakers, ***as is desired by teacher***;
 - c. having CAP adults and cadets share info about the CAP cadet program with students; and
 - d. presenting end-of-program certificates and collecting *Adopt-a-Classroom* evaluations.

- 2- Teacher supporting the program by:
 - a. joining CAP as an AE member, if not already a member;
 - b. registering & participating in the 6th grade (or applicable grade level) ACE program;
 - c. allowing CAP adult and cadet members to present an in person or virtual CAP cadet program informational session for interested students (and parents, if desired);
 - d. ensuring students who are photographed have media permission forms on file at school; and
 - e. agreeing to complete the after-action *Adopt-a-Classroom* evaluation.