

Utah STEM Action Center
Computing Partnership Grant Program Fiscal Year 2027
Application Approval Signature Sheet

Name of Submitting School(s) or District(s): _____

By signing below, the following individuals attest that they have reviewed and approved attached proposal for funding. Each application must have at least one Superintendent or Director signature, one CTE or Curriculum Director signature, and one Business Office signature.

_____ Signature - Superintendent or Director	_____ Print Name	_____ Date
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_____ Signature - Superintendent or Director	_____ Print Name	_____ Date
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_____ Signature – CTE or Curriculum Director	_____ Print Name	_____ Date
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_____ Signature – CTE or Curriculum Director	_____ Print Name	_____ Date
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_____ Signature – District Business Office	_____ Print Name	_____ Date
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