UNITED STATES ACADEMIC DECATHLON®
SUPPLY GRANT AUTHORIZATION FORM
ISSUED THROUGH USAD®

Our school is requesting to be considered for a *Supply Grant*, issued through the United States Academic Decathlon®.

The 'grant kit' includes the following necessary curriculum materials issued in Electronic Download format only:

- ♦ Coaches Handbook
- ♦ Curriculum Package:
  - ✓ Study Guide
  - ✓ Art Reproductions Booklet
  - ✓ Art Resource Guide
  - ✓ Economics Resource Guide
  - ✓ Literature Resource Guide
  - ✓ Mathematics Resource Guide
  - ✓ Science Resource Guide
  - ✓ Social Science Resource Guide
  - ✓ Music Resource Guide
  - ✓ Music (audio portion)
  - ✓ Practice Test Booklet w/CD

> **Note:** This year's novel is not included in the grant package. The novel may be in your school library or may be purchased from USAD.

Please respond to the following questions with a yes/no answer.   Date application completed: _____

1. Is the state Academic Decathlon® organization waiving its fee for the school to participate?	☐ Yes	■ No
2. Has the school officially registered with the state of participation?	☐ Yes	☐ No
3. Has the school assigned a teacher/coach to the Decathlon team?	☐ Yes	☐ No

By signing this agreement, our school certifies that we are a new school or a returning school that has not participated in the Decathlon in the past ten years.

We hereby certify that our school is formally registering for the United States Academic Decathlon® curriculum year.

Please return completed form to your state director who will forward to USAD for processing.

Name of School: _____

School Address: _____
                Street   City   State   Zip

School Phone: _____County: _____ School District: _____

Type of School: ☐ Public ☐ Private ☐ Charter ☐ Other (explain)_____

Grades Served (Mark all that apply): ☐ 9th ☐ 10th ☐ 11th ☐ 12th School Enrollment (Equal to marked boxes): _____

Coach: _____ School Principal: _____

Coach's Phone:_____ Coach's Email: _____

Coach Signature (required): _____

Principal Signature (required):_____

State Director Signature (if applicable)_____