

## SCHOOL PROJECT VERIFICATION FORM

This form should be completed for the School project and placed in the front of the project notebook/scrapbook.

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

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

Date Project Began: \_\_\_\_\_ Date Project Completed: \_\_\_\_\_

Purpose of Project: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number of CTI Students on Project: \_\_\_\_\_

Name the CTI Student Project Team Members: \_\_\_\_\_

1. \_\_\_\_\_ 6. \_\_\_\_\_

2. \_\_\_\_\_ 7. \_\_\_\_\_

3. \_\_\_\_\_ 8. \_\_\_\_\_

4. \_\_\_\_\_ 9. \_\_\_\_\_

5. \_\_\_\_\_ 10. \_\_\_\_\_

Signature of Student Project Chairperson: \_\_\_\_\_

Signature of CTI Coordinator: \_\_\_\_\_

Signature of CTAE Director: \_\_\_\_\_

Signature of Principal: \_\_\_\_\_