

BOOKS *as* BRIDGES
BY INT'L BOOK PROJECT

Contact Information

Name of School or Organization: _____

Contact Name: _____

Contact Email: _____

Mailing Address: _____

City: _____

State/ Province/ Region/ District: _____

Postal Code: _____

Phone Number: _____

International Book Project Applicants

Has your organization ever received books from IBP: _____

If so when? _____ International File # _____

Classroom Participation

Number of Classrooms Able to Participate in Books as Bridges: __

Age Range of Students: _____

Number of Students in Each Classroom: _____

Grade Level of Students: _____

Please explain how your classroom(s) meet(s) the following criteria:

1. Do you have a classroom setting (not just a library) of students between the ages of 6-16?

2. When does your school year begin? When are breaks/ holidays (longer than 3 days)?

3. Do you have a consistent and reliable Internet connection?

4. Do you have the capability of writing or translating all internet and postal connection into English?

Stipend

Books as Bridges would like to provide our international partners with a small stipend (approximately \$40 US currency) to help fund Books as Bridges related expenses. How would this affect your participation in the program?

Peace Corp Volunteer

Are you a Peace Corp Volunteer? _____

If so, when does your term of service expire and when will your classroom have the capability to continue to participate in the program after you are gone? Please explain. _____
