

OUR TEACHERS AND STAFF DESERVE "P.A.T.S." ON THE BACK!

The Irvine Public Schools Foundation presents

"Parents Appreciating Teachers and Staff"

Thank a special teacher or staff member for all of their hard work through the Parents Appreciating Teachers and Staff (PATS) program. There are many reasons to participate:

- ❖ It is a great way to recognize individuals; teachers, principals, administrative staff, the school nurse or custodian....anyone who makes a difference in your child's education.
- ❖ Your tax-deductible donation goes directly back into the classroom through IPSF's Innovative Teaching Award Program (ITAP), providing grants to IUSD teachers.
- ❖ Teachers and staff members receive a personalized CERTIFICATE OF RECOGNITION with a small GIFT expressing how much you appreciate them.

APPRECIATE YOUR FAVORITE TEACHER OR STAFF MEMBER TODAY!

\$20.00 donation recognizes one (1) teacher or staff

\$40.00 donation recognizes three (3) teachers or staff

\$60.00 donation recognizes five (5) teachers or staff

\$80.00 donation recognizes seven (7) teachers or staff

\$100.00 donation recognizes nine (9) teachers or staff

All Donations Must Be Received By March 5, 2010.

Certificates will be distributed during Teacher Appreciation Week in May 2010

Please make checks payable to IPSF

Mail check with this page to IPSF, 18552 MacArthur Blvd., Suite 200, Irvine, CA 92612.

Please write "PATS" on your envelope

For additional information, please call (949) 263-8340

PLEASE PRINT CLEARLY

Teacher or Staff Member **First and Last Name:** _____

(If you are recognizing more than one person, please include necessary information on the back of this form.)

School or Location: _____

Student's Name: _____

Optional personal message **to be printed on certificate** (20 words or less **only** please): _____

Parent's Name: _____

Phone Number: () _____ **First** **Last**
Email: _____

Home Address: _____

Street

City

Zip



Irvine Public Schools Foundation is a non-profit, 501(c)(3) organization.

PLEASE PRINT CLEARLY

2. Teacher or Staff Member **First and Last Name:**

School or Location:

Student's Name:

Optional personal message **to be printed on certificate** (20 words or less **only** please):

PLEASE PRINT CLEARLY

3. Teacher or Staff Member **First and Last Name:**

School or Location:

Student's Name:

Optional personal message **to be printed on certificate** (20 words or less **only** please):

PLEASE PRINT CLEARLY

4. Teacher or Staff Member **First and Last Name:**

School or Location:

Student's Name:

Optional personal message **to be printed on certificate** (20 words or less **only** please):

**TO VIEW A TRANSLATED VERSION OF THIS FORM,
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