

# APPLICATION FOR SAFETY FUNDS

DATE: \_\_\_\_\_

DISTRICT REFERENCE NO.: \_\_\_\_\_

SCHOOL DISTRICT: \_\_\_\_\_

LOCATION OF ACTIVITY/PROGRAM: \_\_\_\_\_

## FUND CATEGORY:

PRE PLACEMENT PHYSICALS/  
STRENGTH & AGILITY TESTING (SAT)

PERSONAL PROTECTIVE EQUIPMENT

SAFETY EDUCATION & MOTIVATION

SAFETY GRANT PROGRAM

SAFETY INSPECTIONS

SECURITY

SAFETY CORRECTIONS W/C or P/L  
(circle one)

OTHER/CONTINGENCY

PROGRAM DESCRIPTION: \_\_\_\_\_

ANTICIPATED BENEFITS: \_\_\_\_\_

## COST OF ACTIVITY/PROGRAM:

(Labor) \$ \_\_\_\_\_ (Materials) \$ \_\_\_\_\_ **Total \$** \_\_\_\_\_

AUTHORIZED SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

For NBSIA Use Only!

**PREVENTION SERVICES:**  **APPROVED**  **DISAPPROVED**

Prevention Services Manager: \_\_\_\_\_ DATE: \_\_\_\_\_

REASONS FOR DISAPPROVAL: \_\_\_\_\_

## ACCOUNTING CODES:

VENDOR ID: \_\_\_\_\_  
AMOUNT: \$ \_\_\_\_\_  
OK TO PAY: \_\_\_\_\_

INVOICE #: safe \_\_\_\_\_  
ACCOUNT #: \_\_\_\_\_  
POSTING DATE: \_\_\_\_\_