



Florida Department of Education  
Eric J. Smith, Commissioner

Bureau of Family and Community Outreach  
325 West Gaines Street, Suite 544  
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**Faith-Based  
and Community  
Initiatives Outreach**

# Faith and Community-Based Outreach

## **Purpose**

To reach out into the communities to provide educational services to families to help their children reach Florida's academic standards. To provide local faith and community-based organizations with tools that will enable them to promote family involvement in schools in their communities.

## **Goal**

To partner with faith and community-based organizations to reach and support families in their organization to help their children achieve academic excellence.

## **The Florida Department of Education agrees to:**

- Notify your faith and community-based organization about:
  - statewide meetings, conferences, and workshops
  - grants and other funding opportunities
  - other relevant information pertaining to educational opportunities.
- Provide technical assistance for your faith and community-based organization's educational programs, as needed.
- Include your contact person on our mailing list.

## **The Faith and Community-Based Organization agrees to:**

- Partner with the local school district to:
  - recruit mentors and volunteers
  - utilize their facilities for district, school, and community meetings (such as PTA and SAC)
  - make announcements during services regarding upcoming educational events in the area.
- Provide the Department of Education with the name of a contact person.

*If you would like to be a partner, please complete and return the attached Information Sheet.*

# Faith and Community-Based Outreach Partnership

## **INFORMATION SHEET**

Name of Organization \_\_\_\_\_

District/County \_\_\_\_\_

Contact Person \_\_\_\_\_

Title (Bishop\_\_ Reverend \_\_ Pastor\_\_ Elder\_\_ Minister\_\_ Dr.\_\_ Other\_\_\_\_\_)

Mailing Address \_\_\_\_\_

City/Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

E-mail \_\_\_\_\_

Please check (√) if you have any of the following programs in your organization.

<input type="checkbox"/> After School	<input type="checkbox"/> Reading Lab	<input type="checkbox"/> Computer Lab
<input type="checkbox"/> Tutorial	<input type="checkbox"/> College Access	<input type="checkbox"/> Adult Education
<input type="checkbox"/> Mentoring	<input type="checkbox"/> Volunteer	<input type="checkbox"/> Summer Camps
<input type="checkbox"/> Other _____		

### **Please complete and return this form to:**

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