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| --- |
| **Applicant Information** |
| **Contact Name:** |  | Date: |
| **Contact Info:** | Email:  | Phone: |
| Address: | City, State Zip: |
| **Application Type:****(Select one)** | 🗆Individual  | Name: |
| 🗆School  | School Name: |
| 🗆Business | Business Name: |
| Website: |
| **Receiving Law enforcement agency:** |  | Contact Name: |
| **Contact Info:** | Email:  | Phone: |
| Address: | City, State: |
| **Donation type:****(Select one)** | 🗆 Monetary |
| 🗆 In-kind | Description: |
| **Donation value:** |  | Individual minimum donation: $500.00Business or school minimum donation: $1,000.00 |
| **Donation date:** |  |
| **Notes:** |

****The Office of Safe Schools will post to its website (<https://www.fldoe.org/safe-schools/>) a list of persons, schools, and business entities, by county, which have the Florida Safe Schools Canine Partner designation.