Please copy and paste this statement on your district/school/center letterhead

Assurance Statement

By signing this assurance agreement the	ne Principal/Preschool administrator/Center Director
	(name of the administrator) assures that he/she is aware
and supportive of	(teacher name) application for
participating in the Passport to Kinders	garten program.
I am aware that the program will provi	de additional resources – books, teacher professional development, and
family events to my centers' participat	ring classroom(s).
My signing this statement I assure Pass	sport to Kindergarten of the following:
•	_ (applicant teacher name) will be teaching preschool classroom at
(school/fac	ility /district name) in the 2015-16 academic year.
•(facil	lity name) will submit all PNC required site approval documentation to
the PNC foundation by June 1,	2015
• The school/center and its adm	inistration will support and promote the Passport to Kindergarten
program to all participating pr	eschoolers' families.
• Should	(name of the applicant teacher) discontinue her employment or
not teach preschool, partnersh	nip between Passport to Kindergarten and the applicant as well as the
facility will be dissolved.	
I support	(teacher's name) application to make her classroom a
Passport to Kindergarten classroom.	
Administrator name:	Title:
Signature:	Date: