**APPENDIX G**

**Gadsden County Public Schools Virtual Instruction Program**

**Acknowledgement/Verification of Materials Received**

|  |  |
| --- | --- |
| **Parent/Guardian’s Name** |  |
| **Street Address** |  |
| **City, State, and Zip Code** |  |
| **Telephone Number** |  |
| **Email Address** |  |

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(Print Name-Parent/Guardian)*, hereby acknowledge that I received all of the materials listed on the attached page and further acknowledge that the merchandise has been inspected and is without defect.

**Virtual Providers Name** *(Print)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian’s Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Important Note: Please submit this document and copies of the packing slips to the Gadsden County School Board within ten (10) business days of delivery of the materials and resources. Thank you in advance for your cooperation and assistance.***

**Ensure you have included the following documents:**

* Packing Documents
* Acknowledgement/Verification Form Fully Completed

**Please send the above documents via:**

**Postal Mail:**

Gadsden County School Board

Attention: Cheryl Ellison

35 Martin Luther King Jr. Blvd.

Quincy, FL 32351

**Fax:**

(850) 627-3530

**Or, email:**

ellisonc@gcpsmail.com