



NOTE: Please read the "Important Information" handout prior to filling out this STEM Lab application. This handout can be found in the "Forms" section of our website.

SCHOOL INFORMATION

School or Site Name: _____

School/Site Address: _____

School/Site Phone Number: _____

TEACHER CONTACT INFORMATION

First and Last Name: _____

E-mail Address: _____

Primary Phone: _____

Principal or Director Name: _____

Principal or Director E-Mail Address: _____

ADDITIONAL INFORMATION

Grade Level: _____

Number of Students: _____

Special Needs/Requirements: _____

Date Range for STEM Lab Visit: _____ (official date will be decided after teacher training)

Preferred Program or Lesson: _____

Please confirm that there is adequate/safe parking and turn-around space for the STEM Lab truck and trailer:
(The truck and trailer are 40 feet long by 20 feet wide) _____