**Rural and Remote Education Access Program (RREAP)**

**School Cluster Committee (SCC) Committed/Unexpended Funds Year:**

Cluster:       Host School:

Phone Number:       Contact email address:

Total RREAP Funding Received: $      Total RREAP Funding Expended: $      Total RREAP Funding Unexpended: $

Committed Funds Project Details (forward planned projects must be approved by the region)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Project Type**  **(tick the relevant box/boxes)** | **Project Description**  **(brief outline of project)** | **Project Outcomes**  **(how does this activity address geographic isolation of students?)** | **Project Cost** | | |
|  |  |  | **RREAP** | **School/ Community/ Other** | **Total** |
| Curriculum enhancement |  |  |  |  |  |
| Information and Communication Technology |  |  |  |  |  |
| Professional development |  |  |  |  |  |
| Curriculum enhancement |  |  |  |  |  |
| Information and Communication Technology |  |  |  |  |  |
| Professional development |  |  |  |  |  |
| Curriculum enhancement |  |  |  |  |  |
| Information and Communication Technology |  |  |  |  |  |
| Professional development |  |  |  |  |  |
| TOTAL COMMITTED FUNDS (all unexpended funds must be committed to a project within the following year) | | | $ | $ | $ |

I certify that all RREAP funding was expended within the RREAP Guidelines. All unexpended funds have been committed to a project or projects in the following school year. Forward planning has been approved by the region.

Principal Signature: \_\_\_\_\_\_ Date:      Parent Organisation Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

Region \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

For further information, refer to the School Cluster Committee Funding Guidelines.