To assist us in this program could you please complete the form below each semester? This will enable us to better provide for your needs and give us the evidence required when applying for funding for the Adopt-a-reach project.

RiverConnect… Adopt-a-reach

What we have done in our reach….

School:

Semester: Year:

Activity	Date	Time at the river	No. of students & year level(s)	Name of teacher-in-charge

What else we would like to do for our Adopt-a-reach project

We would like the following assistance with our RiverConnect program

Completed by:_____

Date:_____

Forward to RiverConnect Education Coordinator .