



**BEEF FOR THE CLASSROOM 2010-2011
Reimbursement Request Form – Form 2**

(Please fill out and return by mail/fax/email prior to May 15, 2011)

Name:		Grade Level:	
School:			
Street Address (no PO Boxes please):			
City:		State:	Zip:
# of Students helped by grant:		School Phone:	
Total \$\$ of beef receipts submitted:		Email:	

****Funds will not be provided without copies of receipts for beef purchased.***

****All forms must accompany this request before receiving funds.***

- **Reimbursement Request - Form 2**
- **Teacher's Evaluation – Form 3**
- **Copies of receipts for beef purchased**

Return Forms To: Colorado Beef Council
Attn: Julie Moore
789 Sherman Street, Suite 105
Denver, CO 80203

Phone: 303-830-7892

Or Fax To: 303-830-7896

Email questions to: julie@cobeef.com



**BEEF FOR THE CLASSROOM 2010-2011
Teacher Evaluation Form – Form 3**

(Please fill out and return by mail/fax/email prior to May 15, 2011)

Instructor:
School:
List of beef cuts used:
List of ways in which beef was prepared:
In your beef unit did you address: Beef Selection: Yes/No Beef Preparation: Yes/No Beef Storage: Yes/No Beef Nutrition: Yes/No Food Safety: Yes/No
Please check the materials you used in your beef unit: <input type="checkbox"/> <i>MyPyramid</i> Food Guide poster/tear pad <input type="checkbox"/> Beef Nutrients Tear Pad <input type="checkbox"/> Recipe brochures <input type="checkbox"/> Basics About Beef
Comments: Please share your experience, comments and suggestions for this program: