

Intent to Submit Form California 2020 Health Instructional Materials Adoption

Publisher Name _____

Yes, we will participate in this adoption process.

We will submit instructional materials for the following health program(s) and grade level(s):

Program Name(s)	Grade(s)

The following two people will be our primary company contacts for this adoption:

Name _____ Title _____

Email _____ Phone _____

Name _____ Title _____

Email _____ Phone _____

Address for billing _____

We understand that based upon this form the California Department of Education (CDE) will invoice our company at \$8,000 per grade level, per program. Payment is due by March 27, 2020, and is non-refundable.

Signature of Authorized Company Representative _____

Please complete, sign, and return this form no later than 5 p.m. PST February 12, 2020, to David Almquist, CDE Publisher Liaison, at dalmquis@cde.ca.gov. Please submit any questions to same.