

Invoice
TSIA Participation Fee

To: Curriculum Research & Development Group
Attn: TSI Aquatic – Joanna Philippoff
1776 University Ave.
Honolulu HI 96822

Date: _____

Invoice #: _____

From:

School Name: _____

Teacher's Name: _____

Purpose: Cover fees associated with teacher participation in Teaching Science as Inquiry (TSI) aquatic professional development course and research project with the University of Hawaii at Manoa.

Date of TSIA Workshop Participation: _____

Payment Amount: _____

School Payment Address:

School Name / Check payable to: _____

Street: _____

City/State/Zip: _____

School fiscal office contact name: _____

School fiscal office phone number: _____