

## Appendix 3: Waste Reduction Plan Template SY 23-24

Per [Administrative Procedure 2810](#), each facility is required to submit a completed and signed Waste Reduction Plan by September 30th each year. All items pertain to this current school year.

School or Site Name: \_\_\_\_\_

<b>Below, select actions <u>completed this school year.</u></b>					
	ALL Classrooms	ALL Offices	ALL Breakfast Areas	ALL Lunch Areas	ALL Copier / Printer Areas
Recycling bins present and clearly labeled.					
Recycling bins are next to trash cans.					
Recycling and trash posters are above bins.					

**Below, please describe your site's plan to reduce solid waste sent to the landfill.**

- List at least two recycling or solid waste reduction goals for your school/site this year.

- What additional solid waste reduction actions will your site complete? (Activities/lessons, special events, Reduce/Reuse/Recycle actions, etc.)

[Waste-Free Lunches](#)

Composting

Stack food trays to reduce space and bags

[Recycling PA Announcements](#)

[School Recycling Assembly](#)

[Student Recycling Lessons](#)

[Active Student Green Team/Environmental Club](#)

Reuse scrap paper / both sides of paper

[Flatten boxes to reduce space in the recycling bins/dumpsters](#)

Student Monitors routinely help others correctly sort waste items

Other/Explain:

School/Site Name:

**Waste Reduction Plan SY 23-24**

- How will your team [monitor bins and address mistakes](#)? How can students help?
  
  
  
  
  
  
  
  
  
  
- How will your team communicate program updates and celebrate successes with your school community?

This school year we have:

- Completed the [Annual Recycling Checklist](#).
- Informed all staff and students of the recycling procedures, their roles and responsibilities, and our Waste Reduction Plan.

\_\_\_\_\_  
Principal / Facility Administrator Name

\_\_\_\_\_  
Principal / Facility Administrator Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Building Supervisor Name

\_\_\_\_\_  
Building Supervisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Recycling Coordinator Name

\_\_\_\_\_  
Recycling Coordinator Signature

\_\_\_\_\_  
Date

To Submit: Scan the signed and completed form and email to [sara.campbell@pgcps.org](mailto:sara.campbell@pgcps.org).

For information on recycling and waste reduction visit [www.pgcps.org/recycling](http://www.pgcps.org/recycling).