## **Kermit Independent School District**

## **Master Calendar Event**

This form is to be submitted to the Superintendent of Schools at least six days prior to the scheduled event for approval.

DATE OF REQUEST		CAMPUS		
PERSON SUBMITTING	G REQUEST			4
EVENT				
HEATING/COOLING REQUIRED:				g
LOCATION	DATE	BEGIN TIME END TIM		END TIME
1		-193		
		(i		
EVENT CANCELLED_				
EVENT CHANGED TO				
SPORTING EVENT SO	CHEDULES M	IUST BE ATT	ACHED TO	O THIS FORM
APPROVED BY	Administ	rator		
APPROVAL OF SUPER				
DATE				