**STANDARD FORM FOR PRESENTATION OF PROPOSAL**

**PROFESSIONAL POLICY DEVELOPMENT COUNCIL**

**SUPPORT PERSONNEL POLICY DEVEOPMENT COUNCIL**

**SUPERINTENDENT**

**Title of Proposal**:

**Reason for Proposal**:

**Identify Proposal as it Relates to Elementary and/or Secondary Educational Concerns**:

**Estimated Cost Factor to the School District**:

**Action Desired**:

**Submitted by**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Organization/Group/Superintendent/Individual**



**PUBLIC SCHOOLS**

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