## Request to Place an Item on the Agenda

| Name:                                                                                                                                                                          |                                         |                                                                                  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|----------------------------------------------------------------------------------|--|
| Address:                                                                                                                                                                       |                                         |                                                                                  |  |
| Telephone number:                                                                                                                                                              |                                         |                                                                                  |  |
| School (if applicable):                                                                                                                                                        |                                         |                                                                                  |  |
| Group represented:                                                                                                                                                             |                                         |                                                                                  |  |
| Check if request was submitted to:                                                                                                                                             | ☐ Superintendent                        | ☐ Board Chairperson                                                              |  |
| Conferred with following administrators (                                                                                                                                      | names):                                 |                                                                                  |  |
| Rationale for Request:                                                                                                                                                         |                                         |                                                                                  |  |
|                                                                                                                                                                                |                                         |                                                                                  |  |
| Specific Action Requested/Funding Sourc                                                                                                                                        | e:                                      |                                                                                  |  |
|                                                                                                                                                                                |                                         |                                                                                  |  |
| Check if you are: ☐ Board Member                                                                                                                                               | ☐ District Emp                          | ployee                                                                           |  |
| All requests for items to be placed on the at the Board meeting as specified in Board I the District must be submitted to the Final the Superintendent. All other items submit | Policy 01.45. Items nce Officer for app | s that place a financial obligation on<br>proval first before being submitted to |  |
| Requestor's Signature                                                                                                                                                          |                                         | Date                                                                             |  |
| Finance Officer's Signature                                                                                                                                                    | 2                                       | Date                                                                             |  |
| Superintendent/designee's                                                                                                                                                      | Signature                               | Date<br>Review/Revised:7/8/2021                                                  |  |