2014-15 Budget - Community Request Form

Check One Below

- Enhancement
- Reduction

Location: ____________________________

Requested By: _______________________

Date Submitted: ____________

Check One Below

- One Time Only
- Continuing
- Direct Impact on Teaching and Learning
- Indirect Impact on Teaching and Learning
- Safety/Facility Maintenance
- Other:

Describe Proposal: (be complete and specific)

Use a second page if you need more space

__________________________  _______________________
Date                                Signature