

PROJECT STUDY REQUEST FORM

Date: _____

Name of Requestor: _____

Sponsor (Teacher or Staff): _____

Telephone: _____

Email: _____

Please provide a brief description of your request:

Vendor Information: Please use approved district vendors. The office staff can help you contact the district for information. If this request is for more than \$1,000.00, you must provide a proposal from three district-approved vendors.

VENDOR	ADDRESS AND PHONE NUMBER	BID AMOUNT

Teachers: Please attach completed vendor forms with your request to expedite placing orders if approved.