AUTHORIZATION FOR SUPERINTENDENT'S SIGNATURE



Date:					
Submitted to:				Office Use Only: Board Meeting	
				Doard Weeting	
(Name & Department)				
Document Type:	Agreement		Budget/Budget Rev	Budget/Budget Revision	
	Contract		Cooperative Agree	Cooperative Agreement	
	Grant		Letter/Memo		
	Litigation		MOU		
Professional Services Conf		itract	Resolution		
	RFP		RFQ		
	Other:				
Description of Produc	ct/Services:				
Suggested Board Lang	guage:				
Vendor:					
Dollar Amount:					
Funding Source:					
Term of Contract: Renewal I			newal Date:		
Data Sharing Agreeme	ent/PII Required? Yes	No	If yes, is it attached?	Yes No	
Chief Level Approv	al:		Date:		
GENERAL (COUNSEL USE ONLY		SUPERINTENDI	ENT USE ONLY	
Board Approval Req	uired?YesNo		Approved for Agenda? _	YesNo	
General Counsel:		-	Superintendent:		
Date:			Date:		