



RANKIN COUNTY SCHOOL DISTRICT BOARD AGENDA REQUEST FORM

School / Department Name: _____

Subject / Title _____ Amount of Value: _____

Meeting Date: _____

**THIS REQUEST MUST BE RECEIVED ONE WEEK
PRIOR TO THE BOARD MEETING**

Description of Request

Include all information necessary for consideration of this item by the Rankin County Board of Education. Please attach any documentation requiring board and / or superintendent signatures.

The regular session meets at 7:30AM on the 2nd Wednesday of every month. Special sessions are subject to change, but are usually on the 4th Wednesday.

Call Tammie at 825-5590, ext. 1023 for the exact date and time plus any questions you might have.

SUBMITTED BY: _____ DATE: _____

PRINCIPAL

APPROVED BY SUPERVISOR: _____ MEETING DATE: _____

SPECIAL INSTRUCTIONS: _____

ENTERED: _____

NOTIFIED: _____