

**Conneaut School District
Project Request Form**

Date Received: _____ Work Request # _____

Instructions: Please complete this form and send to your Supervisor / Building Principal

Name of Requestor: _____ School: _____

Location of Request: _____

Project Cost Initial Estimate: _____

Please provide a short description of the project and a justification summary below.

Description: _____

Justification: _____

To be filled out by Administration

Administrator/Principal Review Proceed to next step Not Recommended

Comments: _____

Administrator/Principal Signature: _____

Funding Source: _____

To be filled out by Director of Buildings & grounds

Estimate of Costs / Processes: _____

Architect / Engineering Services Needed? Yes No Comments: _____

Reviewed with Superintendent on: _____

Director of Buildings & Grounds Signature: _____

Superintendent Review Recommended Not Recommended

Superintendent Signature: _____

Reviewed by Buildings & Grounds Committee on: _____

Building & Grounds Committee: Proceed to next step Project Rejected

Board Approved: _____ Date: _____