

DRY CREEK JOINT ELEMENTARY SCHOOL DISTRICT VOLUNTEER PROJECT REQUEST FORM

SCHOOL SITE: _____

SPECIFIC LOCATION: _____
(Attach a site map highlighting locations)

DESCRIPTION OF WORK
OR DONATION: _____
(Include specification)

ATTACH SCALE DRAWINGS: YES NO

INSTALLATION START DATE: _____ DESIRED COMPLETION DATE: _____

VOLUNTEER CONTACT PERSON(S): _____

PHONE NUMBER: DAY _____ EVENING _____

WOULD DISTRICT ASSISTANCE BE REQUIRED? YES NO

EXPLAIN IF YES: _____

APPROVED DENIED
 SITE ADMINISTRATOR: _____ DATE: _____

 ADMINISTRATIVE SERVICES: _____ DATE: _____

Organizations will be responsible for all required compensation for District support services
outside of normal business hours.
Dependent on the nature and scope of work, liability coverage may be required.