

**ST. TAMMANY PARISH SCHOOL BOARD  
LETTER OF INTRODUCTION  
ANNUAL APPLICATION  
INFORMATION  
2024-2025**

**IMPORTANT INFORMATION:**

The Letter of Introduction must be renewed every school year. If you would like more than one event approved during a school year, an application must be submitted per event.

The School System does not promote one business over another.

Permission may be revoked by the Superintendent or his designee at any time.

There cannot be a "buy one get something free" stipulation within the offer.

Flyers cannot contain sponsor names or inappropriate language/pictures adversely affecting the School System.

If direct contact with students is sought, there may be a requirement of fingerprinting with the STPSB for all employees of the applicant agency/business/organization actually entering the schools. The cost of fingerprinting is \$85 for each agency employee and is paid by the agency. If required, payment must be made payable to the St. Tammany Parish School Board in the form of a money order, cashier's check, or certified check. The agency request will then be reviewed once the fingerprinting is complete which may take up to 3 weeks for clearance. A clearance determination will be made followed by an acknowledgement phone call or letter.

Parent Teacher Association or Booster Clubs sponsoring an event or activity on a school's campus must first have the principal's permission. If the event or activity requires a vendor to be involved, the vendor must comply with all privacy, vetting, and any other requirement STPSB has regarding vendors on campus. The vendor must have a current Letter of Introduction.

For all services offered to employees, contact the employee benefits program, STAR, at (985) 898-3297 for possible inclusion in the program.

A School Directory and information can be found on the School System website: <http://stpsb.org/>

**APPLICATION PROCESS:**

The application must be legible and completed in its entirety. Submit to the Administrative Supervisor, Jennifer Alleman, for approval:

Mail to:

321 N. Theard St., Covington, LA 70433, Attention Jennifer Alleman

Or

Email – [Jennifer.Alleman@stpsb.org](mailto:Jennifer.Alleman@stpsb.org)

Once a determination has been reached, a notification will follow.

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ANNUAL APPLICATION  
2024-2025**

\_\_\_\_\_ **AGENCY/BUSINESS/ORGANIZATION:** \_\_\_\_\_  
Name (Print) (Print)

**ADDRESS:** \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

**PHONE #:** \_\_\_\_\_ **AGENCY: PROFIT/NON-PROFIT EMAIL:** \_\_\_\_\_  
(Circle one)

**NAME OF ANY REPRESENTATIVES INCLUDED IN THE REQUEST TO VISIT SCHOOL SITES:**  
\_\_\_\_\_  
(Print)

**CATEGORIES: (Check those that apply)**

- |   |  |
|---|--|
| <input type="checkbox"/> Camp/Clinic              | <input type="checkbox"/> Recreational District                 |
| <input type="checkbox"/> Company Offering Service | <input type="checkbox"/> Fundraiser                            |
| <input type="checkbox"/> Community Event          | <input type="checkbox"/> Achievement Award/Contest/Scholarship |
| <input type="checkbox"/> Employment Opportunity   | <input type="checkbox"/> Educational Presentation/Program      |
| <input type="checkbox"/> Field Trip               | <input type="checkbox"/> Other                                 |
| <input type="checkbox"/> Membership               | Explain: _____   |

**REQUEST CONTAINS: (Check those that apply)**

- |  |  |
|--|--|
| <input type="checkbox"/> Letter requesting Letter of Introduction on agency letterhead | <input type="checkbox"/> Program sample/outline    |
| <input type="checkbox"/> Copy of flyer and information to be distributed               | <input type="checkbox"/> Presentation demo/outline |

**WILL YOU: (Check those that apply)**

- Contact the media? YES/NO Explain: \_\_\_\_\_
- Use information obtained from the School System to an outside source? Who? \_\_\_\_\_
- Have direct contact with students? YES/NO Explain: \_\_\_\_\_
- Do you have a Letter of Introduction from a previous school year? YES/NO List year: \_\_\_\_\_

\_\_\_\_\_  
Signature Position with Agency/Business/Organization Date

\*\*\*\*\*

**FOR OFFICE USE ONLY**

**APPROVED TO SPEAK WITH THE ADMINISTRATION**

- Flyer approved  Student distribution  Flyer in school office only
- Post in faculty lounge only  Must have school staff present at all times when there is direct contact with students
- Other: \_\_\_\_\_

**FINGERPRINTING PROCESS REQUIRED (Must be completed before final approval.)**

Date Notified \_\_\_\_\_ Initials \_\_\_\_\_  
Date Completed \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_

**DENIED**

- Does not meet the needs of the system
- System has a similar program
- Other: \_\_\_\_\_

**APPROVED/DENIED BY:**

\_\_\_\_\_  
Signature Supervisor of Administration Position \_\_\_\_\_ Date

**Comments:**