

Pleasantville Public Schools



Dr. Marilyn Martínez, Superintendent

Board Resolution Approval Request (One form per resolution)

Location: _____ Organizer: _____

Organization/Club/Group: _____

Start Date & Time: _____ End Date & Time: _____

Name: _____

Description: _____

If Vendor is needed, Why? Justification:

Cost: \$ _____ Funding Source: _____
(Detail Cost: include invoice)

Staff Member Signature: _____ Date: _____

Principal/Administrator Signature: _____ Date: _____

_____ Approved _____ Not Approved

Superintendent Signature: _____ Date: _____

_____ Approved _____ Not Approved