

**APPLICATION FOR
SCHOOL DISTRIBUTION OF NON-SCHOOL INFORMATION**

Date _____

Name of organization _____ Non-profit _____ Profit _____ (Check one)

Organization's primary goals _____

Specific program promoted by this distribution _____

Describe recreational or educational value to students _____

Requested date of distribution _____

List schools and/or grade levels to receive information _____

Representative's name _____ Title _____

Address _____ Phone _____

Fax _____ Signature _____

**SUBMIT FORM AND ONE COPY OF EACH PIECE OF MATERIAL FOR WHICH
DISTRIBUTION IS REQUESTED**

If approved, the following statement may be required to be printed on materials distributed:

"The District does not sponsor or endorse this event/information
and the District assumes no responsibility for it."

The exact date of distribution is to be determined by each school principal.

APPROVAL CERTIFICATE/District Use Only

Approved for distribution at principal's discretion through the following schools:

Grades: _____

Disapproved

The following materials: _____

Signature _____
Superintendent/Designee

Current Date _____