

REQUEST FOR BOARD ACTION

Board Meeting Date:		-			Depai	tment	
Requester's Name					Title		
Consent Agenda:		Timed Age Amt. of Time Re PowerPoint Pres	equired:	Yes	No]	Item For Consideration:
Board Action Requested:							
Background/Justification:							
Number of original documents requiring signature (i.e., Agreements, Grants): (Provide original documents to the Administration Office Manager)							
Number of certified resolutions required: (Email resolution in Word format to the Administration Office Manager)							