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|--|--------------------------|-----|-------------------------|--|
| Board Meeting Date:  |                          |     | Department              |  |
| Requester's Name   |                          |     | Title                   |  |
| Consent Agenda:  | Timed Agenda Item        |     | Item For Consideration: |  |
|  | Amt. of Time Required:   |     |                         |  |
|  | PowerPoint Presentation? | Yes | No                      |  |
| Board Action Requested:  |                          |     |                         |  |
| Background/Justification:  |                          |     |                         |  |
| Number of original documents requiring signature (i.e., Agreements, Grants):<br><i>(Provide original documents to the Administration Office Manager)</i> |                          |     |                         |  |
| Number of certified resolutions required:<br><i>(Email resolution in Word format to the Administration Office Manager)</i>                               |                          |     |                         |  |