Community Relations

Gifts to the District

Application Form for Removal Donations, Memorials, and Artifacts

Name of person submitting the form: _____

Date submitted: _____ Is this an artifact to honor someone? Yes No

How long has the item been in the building? _____

Reason for removal: _____

_____

_____

_____

Plan for item(s) disposal: _____

_____

_____

_____

Building Principal: Remove _____ Do not Remove _____

Please state the reason(s) for a negative recommendation or any modifications that you would like the committee to consider.

_____

_____

_____

_____

Committee Action: Remove _____ Do not Remove _____

Comments:

_____

_____

_____

ADOPTED: September 16, 2009