

## REQUEST FOR BOARD APPROVAL OF SUPPLEMENTAL MATERIALS

*Prior to submission, be sure to check [DestinyWeb](#) to see if requested item is board approved. If it is, please use Form TXT1003*

**Requestor**

Contact Name \_\_\_\_\_ School/Department \_\_\_\_\_  
 Contact Phone \_\_\_\_\_ Contact E-Mail \_\_\_\_\_  
 Teacher \_\_\_\_\_ Principal/Dept Head \_\_\_\_\_

**Material Requested**

Title \_\_\_\_\_ Quantity Requested \_\_\_\_\_  
 Publisher \_\_\_\_\_ Unit Cost \_\_\_\_\_  
 Author(s) \_\_\_\_\_ Estimated Total \_\_\_\_\_  
 Edition \_\_\_\_\_ ISBN \_\_\_\_\_

**Course Information**

Course \_\_\_\_\_ Grade Level(s) \_\_\_\_\_ % of Classroom Usage? \_\_\_\_\_

**Board Meeting Information**

Who will be present for Questions at Board Meeting? \_\_\_\_\_

Purpose \_\_\_\_\_

Justification \_\_\_\_\_

School Principal \_\_\_\_\_ Date \_\_\_\_\_  
*Signature*

**Funding Information**

Budget Code \_\_\_\_\_

Funding Source  M & O  ALE  Deseg  Title 1  Other: \_\_\_\_\_

**Program Overview (600 character limit)**

\_\_\_\_\_

**Program of Study (400 character limit)**

\_\_\_\_\_

**Justification for Book Request (400 character limit)**

\_\_\_\_\_

**Description of Text (400 character limit)**

\_\_\_\_\_

**District Office Use Only**

Elementary/Secondary Leadership	<input type="checkbox"/> Supplemental	<input type="checkbox"/> Occasional		
<i>E-Signature</i> _____				Date _____
Curriculum & Instruction	<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved		
<i>E-Signature</i> _____				Date _____
Finance	<input type="checkbox"/> Confirmed	<input type="checkbox"/> Not Confirmed		
<i>E-Signature</i> _____				Date _____
Teaching & Learning	<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved		
<i>E-Signature</i> _____				Date _____
Scheduled Board Meeting Date	_____			