RESET FORM

Request to Present Program to Students

Name: _____

Please check: ☐ Business ☐ Individual

Name of Business/Organization: _____

Contact Information: _____

Intended Audience (please check): ☐ Elementary or ☐ Secondary students

Specific Campus (please check): ☐ Yes or ☐ No If yes please list:

_____

1. Description of how the project will be conducted (explain what you want to do).

2. How will the project impact students?

3. What is your timeline for the project?

4. Please identify any other volunteers or community partners that will be involved in the project.

Approved by_____ Denied by_____

Date: _____