

**St. Louis Sharks
Technology
Foundation**



Request Form

Requestor Name:

Request/Project Title:

How many students will benefit from the fulfillment of this request:

Grade level(s) of students that will benefit from the fulfillment of this request:

Details of Request (include how the project will be implemented and how it will enhance student learning/benefit the students).
information on a separate page:

Itemized list of items needed to be purchased:

Complete the form below indicating each item required to be purchased (including qty & unit cost).

Item Name	Qty	Unit Cost	Total Cost

Dave Andrews Signature (Required): _____

All requests must be verified by Dave Andrews. *It is the responsibility of the submitter to ensure this has been done prior to submitting this form for consideration. Submissions lacking Dave's signature will be rejected. You can save and attach to an email to dandrews@giresd.net for Dave's Approval.*

Email completed form to info@stlouishsharks.org or turn in to the Superintendent's Office.