

UNIFIED SCHOOL DISTRICT NO. 459
BUCKLIN SCHOOLS

APPLICATION FOR USE OF SCHOOL FACILITIES

ORGANIZATION _____ DATE OF REQUEST _____

PERSON IN CHARGE OF EVENT _____

BUILDING REQUESTED _____

PURPOSE OF USE _____

DATE OF USE _____ STARTING TIME _____ ENDING TIME _____

The applicant will be issued a key to unlock, control and lock facilities. The key must be returned the following day.

Date Key Issued _____

Date Key Returned _____

I have read and received a copy of the Board of Education Policy, School Facilities, and will comply with all rules and regulations therein.

Group Classification _____

Signature of Applicant

Fee _____

Request Approved _____

Signature of Superintendent

Request Denied _____

Reason for Denial: