

# REQUEST TO DISTRIBUTE MATERIALS TO STUDENTS IN PONTOTOC COUNTY SCHOOL DISTRICT

Date: \_\_\_\_\_

Name of organization: \_\_\_\_\_

Grades to which organization wishes to distribute materials: \_\_\_\_\_

Date organization wishes to distribute materials: \_\_\_\_\_

List of items to be distributed:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Signature of Organization Representative: \_\_\_\_\_

Telephone Number of Organization Representative: \_\_\_\_\_

*EXAMPLES OF ALL ITEMS TO BE HANDED OUT TO STUDENTS  
MUST BE INCLUDED WITH THIS REQUEST*

**(For School Use Only)**

Date Request Received: \_\_\_\_\_

School Area Designated for Distribution: \_\_\_\_\_

Time of Distribution: \_\_\_\_\_

Signature of Principal: \_\_\_\_\_

Request Approved: \_\_\_\_\_ Request Denied: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Superintendent: \_\_\_\_\_