

PENN MANOR SCHOOL DISTRICT

ADMINISTRATIVE REGULATION

APPROVED: March 8, 2013

REVISED:

701-AR-6. REQUEST TO NAME FACILITY FORM

Instructions: All items on this form must be completed for consideration of the request. Attach an additional sheet if more space is needed. **RETURN THE COMPLETED FORM TO THE SUPERINTENDENT.**

Name of person/organization making this request: _____

Mailing address: _____

Phone number: _____

Name of the individual to be honored: _____

What specific facility are you requesting for naming in honor of the individual? _____

Describe the lasting and outstanding contribution made by this individual to the district and/or to this particular facility: _____

Signature: _____

Date: _____