

Request to Place an Item on the Agenda

Name: _____

Bret Henderson

Address: _____

407 Elaine Drive Hopkinsville, KY 42240

Telephone number: _____

270 348 6832

Name of school children attend, if applicable: _____

Group represented: _____

TCHS Volleyball

Check if request was submitted to: _____

☐ Superintendent☐ Board Chairperson

Conferred with following administrators (names): _____

Mrs. Pope & Mr. Benningfield

Description of Issue: _____

This is an overnight, 1 night, trip for a
tournament in Lexington, KY.

Specific Action Requested: _____

Approval for overnight trip.

Check if you are: _____

☐ Board Member☒ District Employee☐ Community Member

All requests for items to be placed on the agenda must be submitted to the Superintendent prior to the Board meeting as specified in Board Policy 01.45. Items submitted shall require prior approval of the Superintendent.

Review/Revised: 3/13/06