



### Emergency Needs Request Form

***Requests for emergency student needs may be made at any time.***  
*To be completed by the School Principal and returned to the Parish Representative.*

SCHOOL: \_\_\_\_\_

Date	
Parish Representative	
School	
Principal	
Principal's Phone	
Principal's Email	
Description of Request (in order of priority)	Amount
1	
2	
3	
4	
Total Funds Requested	

- Please submit cost documentation or 3 bids with this request.

**Parish Representative Approval**

- 1 This request meets our funding guidelines.
- 2 I have reviewed the request for clarity.
- 3 Cost documentation is attached.

Date \_\_\_\_\_ Amount Approved \$ \_\_\_\_\_

Parish Rep Signature: \_\_\_\_\_ -

*Revised 9/01/2018*