**FILE: ED-E**

**REQUEST TO USE DISTRICT-OWNED MATERIALS AND EQUIPMENT**

Name of Staff Member \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Material/Equipment to Be Used**

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**Purpose of Use of Material/Equipment**

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**\_\_\_ Request Approved**

Stipulations (if any):

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**\_\_\_ Request Denied**

Reasons:

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Signature of Principal/Supervisor Date