

WEST BONNER COUNTY SCHOOL DISTRICT

POLICY CHANGE REQUEST FORM

Please attach a copy of the policy that you wish to change **AND** attach new language for the requested changes. Forward all information to Board Clerk.

Policy Number: _____

Policy Title: _____

Reason for the change: _____

Requested By: _____

Checklist:

Call Policy Committee meeting to review suggested changes. Meeting date: _____

Does Policy Committee accept suggested changes? Yes No If yes, follow steps below.

First Reading of Policy to School Board: _____

Second Reading of Policy to School Board: _____

Send revised policy to Leadership Team.

Send revised policy to Technology to update on web site.

All of the steps above have been completed, please initial: _____