



Indian Education Program  
Tacoma Public Schools  
Service Request

Student # \_\_\_\_\_

Date: \_\_\_\_\_

Student Name: \_\_\_\_\_

School: \_\_\_\_\_

Grade: \_\_\_\_\_

506 on file: Yes No Tribe/Group/Band \_\_\_\_\_

Request: _____ _____ _____ _____
<b>(All requests need to be submitted 2 weeks prior to due date if applicable)</b>

**Amount of Request:** \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Phone Number: \_\_\_\_\_

.....  
(To be filled in by Indian Education Program staff)

Report Card/Progress Reports/Transcripts on File: Yes No N/A

Attendance on File: Yes No N/A

Free or Reduced Lunch: Yes No

Indian Education Staff Assigned: \_\_\_\_\_

Service Request: \_\_\_\_\_

Acctg: \_\_\_\_\_

JE Approval: _____
Acctg: _____