

Lisle Elementary



Home & School
Organization

WISH LIST REQUEST

Teachers/Staff/Parents – Please complete this form for each requested item. Your building’s principal must then approve the request prior to consideration by the LEHSO. Once reviewed, you will be notified if your wish has been granted. *Use back of form if necessary.*
Email any questions to president@LEHSO.org

WHAT I WISH FOR (PLEASE ATTACH ALL LITERATURE):

DESCRIPTION:

WHO WOULD IT BENEFIT?

HOW WOULD THIS ENHANCE THE EDUCATIONAL EXPERIENCE OF THE STUDENTS?

COST: _____ **DATE CHECK NEEDED:** _____

REQUESTED BY: _____ **DATE:** _____

CHECK PAYABLE TO: _____

ADD’L INFORMATION:

Principal Approval: _____ *Date:* _____

LEHSO Decision: *Approved* *Denied* *Date:* _____

Check # _____ *Date Issued:* _____