

# Request for Legal Assistance

ATTORNEY – CLIENT COMMUNICATION

DATE RECEIVED: _____
MATTER ASSIGNED TO: _____

PLEASE SUBMIT COMPLETED REQUEST FORM TO  
DCSD OFFICE OF LEGAL AFFAIRS:

- \_\_\_ H. ERIC HILTON (DISTRICT WIDE, BOARD AGENDA ITEMS & EXCEPTIONAL EDUCATION)
- \_\_\_ MARISSA KEY (EMPLOYEE RELATIONS, OPEN RECORDS & TITLE IX MATTERS)
- \_\_\_ GLINTON DARIEN (RISK MANAGEMENT & WORKERS COMPENSATION MATTERS)
- \_\_\_ CHASITY MIDDLEBROOKS-CODY (HUMAN RESOURCES & STUDENT RELATIONS)
- \_\_\_ DANIEL DENTON (CONTRACTS)

WITH A COPY TO:  
\_\_\_ SELYNTHIA WISE, OFFICE SPECIALIST

\*\*\* This request is a confidential communication and should be treated as such \*\*\*

Topic: \_\_\_\_\_  
*(e.g., contract review, policy matter, etc.)*

Action/response required \_\_\_\_\_

Date of request: \_\_\_\_\_ Date by which a response is needed: \_\_\_\_\_  
*(Allow 3 to 5 business days)*

Background information: \_\_\_\_\_

Please attach/include any additional information/documents that are relevant to your request.

Attachment(s)? \_\_\_ Yes \_\_\_ No Description of attachments, if any \_\_\_\_\_

Requested by: \_\_\_\_\_  
Print Name Signature

Email: \_\_\_\_\_ Telephone: \_\_\_\_\_

Department: \_\_\_\_\_

Cabinet Member authorizing the request: \_\_\_\_\_

This item is approved as to form? \_\_\_\_\_ Yes \_\_\_\_\_ No

By: \_\_\_\_\_

Comments: \_\_\_\_\_

Please copy on email: All that are copied on original email

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### Telephone Conference

Was this matter an emergency requiring immediate contact?  Yes  No

Date Called: \_\_\_\_\_ Time: \_\_\_\_\_ Total Time of Conference: \_\_\_\_\_

Advice Given: \_\_\_\_\_

Action Taken: \_\_\_\_\_