

Request for Legal Assistance
ATTORNEY - CLIENT COMMUNICATION

DATE RECEIVED: _____
MATTER ASSIGNED TO: _____

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

- [x] 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: SecureIT Initiative
(e.g., contract review, policy matter, etc.)

Action/response required Legal Review

Date of request: 8/29/24 Date by which a response is needed: _____
(Allow 3 to 5 business days)

Background information: Efforts to secure Info Systems & Network resources by protecting confidentiality of DCSD

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

Attachment(s)? Yes [x] No Description of attachments, if any _____

Requested by: LaKeishaBrooks LaKeisha Brooks
Print Name Signature

Email: lakeisha_brooks@dekalbschoolsga.org Telephone: 678-676-1274

Department: DIIT

Cabinet Member authorizing the request: [Signature] Maryke Davis

This item is approved as to form? [x] Yes _____ No

By: H. Eric Hilton, Esq.

Comments: _____

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

Telephone Conference

Was this matter an emergency requiring immediate contact? [] Yes [] No

Date Called: _____ Time: _____ Total Time of Conference: _____

Advice Given: _____

Action Taken: _____