



DATE RECEIVED: _____
MATTER ASSIGNED TO: _____

Request for Legal Assistance
DCSD Office of Legal Affairs
 ATTORNEY – CLIENT COMMUNICATION

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

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

DESCRIPTION OF REQUEST

Title of Item/Topic:

Donation from Austin Elementary School Foundation request to provide Professional Learning Training for School Educators.

(e.g., contract review, policy matter, etc.)

Date of request: 3.21.25 Due Date: 3.24.25 (Allow 3 to 5 business days)

Background information/Detail: Austin ES Foundation to provide professional learning from Solution Tree PLC at work not to exceed \$15,000.00

PROCUREMENT DETAILS (if applicable)

Include details confirming that all applicable DCSD procurement policies and requirements have been adhered to: _____

SUPPORTING DOCUMENTATION

Please attach/include any additional supporting documentation that are relevant to your request.

Description of supporting documentation, if any Please see the attached documents

REQUIRED AUTHORIZATION

Requested by: Myra Stewart

Email: myra_s_stewart@dekalbschoolsga.org Telephone: 978-676-0218

Department: CEIP

Cabinet Member authorizing the request: Dr. Yolanda Williamson

LEGAL APPROVAL

Approved as to form by the DCSD Office of Legal Affairs? Yes No

-OR- (check one only)

Approved as to form by Outside Legal Counsel? Yes No

*Referrals to Outside Legal Counsel must be coordinated and approved by the DCSD Legal Dept.

Approving Attorney (and law firm if Outside Counsel) H. Eric Hilton, Esq.

WPH

Comments: _____