Twindly Bridge Charter School

Matanuska-Susitna Borough School District

141 E Seldon Road, Wasilla, Alaska 99654 Phone 907.376.6680

STUDENT ORDER PRE-APPROVAL REQUEST

Student NameGradeGrade						
Vei	ndor					
		(one v	endor per order)			
ILP Subject (Math, LA, Sci, PE, etc)	Item#	Description of It	em or Service	QTY	Unit Cost	Total Cost
					1	
					u	
					Shipping	
By signing below, I agree that these purchases support student's current Individual Learning Plan and agree to cost being deducted from the student's allotment.					Total	
PARENT SIG	NATURE			Date	9	
ADVISORS SI	GNATURE			Dat	e	
Advisors	Name		(Office Use Only)			
PO #						
Date To Vendor Intials			Date To FMP		(Name and Month)Intials	
CURRICUL	UM PICKED	UP BY	D	ATE		