NEW RESOURCE NUMBER REQUEST FORM

DATE: ____________________________

TO: SANTA CRUZ COUNTY OFFICE OF EDUCATION
    ATTN: EXTERNAL BUSINESS SERVICES DIVISION
    E-mail account: COE_business_help@santacruz.k12.ca.us

Development of new resources must be coordinated with the Santa Cruz County Office of Education. We are requesting the following resource be added to our chart of accounts:

FEDERAL/STATE
Name of Grant/Entitlement: ________________________________
PCA Number: ________________________________
Resource Number: ________________________________

LOCAL
Name of Local Program: ______________________________________

(Check One): Non-Restricted (0001-0999) ______
             Restricted (9011-9999) ______

Preferred number/Description: ________________________________

Name of Requesting District
Name of Person Requesting
Telephone Number

COE USE ONLY

NEW RESOURCE NUMBER: DATE ADDED: INITIALS:

cc: I.T. Services Manager