
SCHOOL DIVISION NAME AND DIVISION CODE

VIRGINIA DEPARTMENT OF EDUCATION

AUTHORIZATION OF SIGNATURES IN ABSENCE OF DIVISION SUPERINTENDENT

Fiscal Year 2005

The School Board of the County, City, or Town of _____
at a meeting held on _____ by duly recorded vote
approved and authorized the person(s) listed below to sign all
Virginia Department of Education reports, documents, requisitions,
and other official correspondence in the absence of the Division
Superintendent for the period indicated below.

_____ Authorized Signature
_____ Please Type Name
_____ Please Type Title
_____ to _____
Period of Signature Authorization in FY 2005

_____ Authorized Signature
_____ Please Type Name
_____ Please Type Title
_____ to _____
Period of Signature Authorization in FY 2005

_____ Authorized Signature
_____ Please Type Name
_____ Please Type Title
_____ to _____
Period of Signature Authorization in FY 2005

_____ Authorized Signature
_____ Please Type Name
_____ Please Type Title
_____ to _____
Period of Signature Authorization in FY 2005

This is to certify that the above action was approved and incorporated in the minutes of said School Board on the aforementioned date.

DATE

SIGNATURE OF DIVISION SUPERINTENDENT

PLEASE TYPE NAME

DATE

SIGNATURE OF SCHOOL BOARD CHAIRMAN

PLEASE TYPE NAME

Please return by July 30, 2004, to: Mrs. Leigh H. Williams
Senior Budget Analyst
Virginia Department of Education
P. O. Box 2120
Richmond, VA 23218-2120