

**DEPARTMENT OF DEFENSE EDUCATION ACTIVITY (DoDEA)
REQUEST FOR APPROVAL OF SCHOOL ORGANIZATIONAL CHANGE**

1. PROPOSAL

a. PURPOSE (<i>X one</i>) <input type="checkbox"/> Name Change <input type="checkbox"/> Open New School <input type="checkbox"/> Close School <input type="checkbox"/> Modify Grade Structure <input type="checkbox"/> Request Cancellation	b. EFFECTIVE DATE (YYYYMMDD)
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c. DOCUMENTATION (*Attach plan of action and milestones*)

2. DEPUTATE	3. SCHOOL NAME/PROPOSED NAME	4. ENROLLMENT (<i>Current/projected</i>)
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5. LOCATION	6. SUPPORTING MILITARY INSTALLATION	7. GRADE CONFIGURATION (<i>Current/projected</i>)	8. DISTRICT
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9. CODES AND ADDRESSES

a. DOD ACTIVITY ADDRESS CODE (<i>DoDAAC</i>)	b. ORGANIZATION CODE
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c. TAC 1 ADDRESS (<i>Mailing</i>)	d. TAC 2 ADDRESS (<i>Freight</i>)	e. TAC 3 ADDRESS (<i>Billing</i>)	f. TAC 4 ADDRESS (<i>Commercial</i>)
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10. FEEDER PLAN a. ATTENDS b. RECEIVES	11. HUMAN RESOURCE OFFICE (<i>HRO</i>)	12. RESOURCE MANAGEMENT OFFICE (<i>RMO</i>)
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13. RATIONALE

14. FACILITIES REQUIREMENTS

15. STAFFING REQUIREMENTS (*Increase/decrease in Fiscal Year Staffing to effect the change*)

16. SUPPORT AGREEMENT (SA) REQUIREMENTS

17. BUDGET IMPACT ANALYSIS (*Increase/decrease in Fiscal Year Funding to effect the change*)

18. MILITARY COORDINATION (*Provide copies of correspondence between military service coordinating officials and DoDEA*)

19. APPROVALS

a. DISTRICT SUPERINTENDENT (1) APPROVED (<i>X one</i>) <input type="checkbox"/> Yes <input type="checkbox"/> No (2) SIGNATURE (3) DATE (YYYYMMDD)	b. AREA DIRECTOR (1) APPROVED (<i>X one</i>) <input type="checkbox"/> Yes <input type="checkbox"/> No (2) SIGNATURE (3) DATE (YYYYMMDD)	c. DIRECTOR, DoDEA (1) APPROVED (<i>X one</i>) <input type="checkbox"/> Yes <input type="checkbox"/> No (2) SIGNATURE (3) DATE (YYYYMMDD)
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(Attach additional pages if necessary.)