



DISTRICT SCHOOL BOARD OF PASCO COUNTY
FORMS MANAGEMENT AND CONTROL
APPLICATION/AUTHORIZATION

MIS Form #100
 1/94

Sponsor's Name and Title	Date of Application
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Complete Title of Form	MIS Form #
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<p>Status of Form</p> <p><input type="checkbox"/> New Form</p> <p><input type="checkbox"/> New Form (replacing MIS Form (s) _____)</p> <p><input type="checkbox"/> Destroy Existing MIS Form (s) _____ on _____</p> <p><input type="checkbox"/> Existing Form (no changes)</p> <p><input type="checkbox"/> Existing Form (with minor changes)</p> <p><input type="checkbox"/> Continue using MIS Form _____ until depleted</p> <p><input type="checkbox"/> Deleted</p>	<p>Number of Forms Requested</p> <hr/> <p>Inventory Control</p> <p><input type="checkbox"/> Warehouse</p> <p><input type="checkbox"/> Sponsor</p>
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Purpose of Form

<p>Frequency of Completion</p> <p><input type="checkbox"/> Annually</p> <p><input type="checkbox"/> Semi-Annually</p> <p><input type="checkbox"/> Quarterly</p> <p><input type="checkbox"/> Monthly</p> <p><input type="checkbox"/> Bi-Weekly</p> <p><input type="checkbox"/> Weekly</p> <p><input type="checkbox"/> Daily</p> <p><input type="checkbox"/> As Needed (unscheduled)</p>	<p>Authorization (cite the specific law or rule)</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; text-align: left; padding: 5px;">Category</th> <th style="width: 50%; text-align: left; padding: 5px;">Specific Reference</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">Federal law or Regulation _____</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">State Law or Regulation _____</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">School Board Rule _____</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">Program Operation (explain briefly) _____</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">_____</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">_____</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">_____</td> <td style="padding: 5px;">_____</td> </tr> </tbody> </table>	Category	Specific Reference	Federal law or Regulation _____	_____	State Law or Regulation _____	_____	School Board Rule _____	_____	Program Operation (explain briefly) _____	_____	_____	_____	_____	_____	_____	_____
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DISTRICT SCHOOL BOARD OF PASCO COUNTY
FORMS MANAGEMENT AND CONTROL
PRINT SPECIFICATIONS/AUTHORIZATION
FOR MIS FORM # _____

MIS Form #100
 Back - 1/94

Single Sheet Form: Total Number of Individual Form.....

Multiple Sheet Form: Total Number of Form Sets.....

<p style="text-align: center;">Size of Form</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 30px; border: 1px solid black;"><input type="text"/></td><td>5 1/2 x 8 1/2" (1/2 letter)</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>8 1/2" x 11" (letter)</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>8 1/2" x 14" (legal)</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>Custom size _____ x _____</td></tr> </table>	<input type="text"/>	5 1/2 x 8 1/2" (1/2 letter)	<input type="text"/>	8 1/2" x 11" (letter)	<input type="text"/>	8 1/2" x 14" (legal)	<input type="text"/>	Custom size _____ x _____	<p style="text-align: center;">Status of Form</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 30px; border: 1px solid black;"><input type="text"/></td><td>New Form</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>Existing Form</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>EXISTING FORM WITH CHANGES</td></tr> </table>	<input type="text"/>	New Form	<input type="text"/>	Existing Form	<input type="text"/>	EXISTING FORM WITH CHANGES																														
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<p>Single Sheet Form: Type of Paper</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 30px; border: 1px solid black;"><input type="text"/></td><td>Bond, High Quality</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>Bond, Standard Quality</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>Index Paper (white only)</td></tr> </table> <p>Color of Paper</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 30px; border: 1px solid black;"><input type="text"/></td><td>White (W)</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>Blue (B)</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>Green (Gr)</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>Canary (C)</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>Goldenrod (Go)</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>Buff</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>Pink (P)</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>Salmon</td></tr> </table>	<input type="text"/>	Bond, High Quality	<input type="text"/>	Bond, Standard Quality	<input type="text"/>	Index Paper (white only)	<input type="text"/>	White (W)	<input type="text"/>	Blue (B)	<input type="text"/>	Green (Gr)	<input type="text"/>	Canary (C)	<input type="text"/>	Goldenrod (Go)	<input type="text"/>	Buff	<input type="text"/>	Pink (P)	<input type="text"/>	Salmon	<p>Multiple Set Form (NCR): Standard Color Sequence</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 30px; border: 1px solid black;"><input type="text"/></td><td>2 part (W, C)</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>3 part (W, C, P)</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>4 part (W, C, P, Go)</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>5 part (W, Gr, C, P, Go)</td></tr> <tr><td style="border: 1px solid black;"><input type="text"/></td><td>6 part (W, B, Gr, C, P, Go)</td></tr> </table> <p>Custom Color Sequence</p> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 30px;">Page 1</td><td style="border: 1px solid black;"><input type="text"/></td></tr> <tr><td>Page 2</td><td style="border: 1px solid black;"><input type="text"/></td></tr> <tr><td>Page 3</td><td style="border: 1px solid black;"><input type="text"/></td></tr> <tr><td>Page 4</td><td style="border: 1px solid black;"><input type="text"/></td></tr> <tr><td>Page 5</td><td style="border: 1px solid black;"><input type="text"/></td></tr> <tr><td>Page 6</td><td style="border: 1px solid black;"><input type="text"/></td></tr> </table>	<input type="text"/>	2 part (W, C)	<input type="text"/>	3 part (W, C, P)	<input type="text"/>	4 part (W, C, P, Go)	<input type="text"/>	5 part (W, Gr, C, P, Go)	<input type="text"/>	6 part (W, B, Gr, C, P, Go)	Page 1	<input type="text"/>	Page 2	<input type="text"/>	Page 3	<input type="text"/>	Page 4	<input type="text"/>	Page 5	<input type="text"/>	Page 6	<input type="text"/>
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Special Instructions:

- Drilled Holes (camera-ready copy must show size, number and spacing of holes)
- Sequence numbering of individual forms or form sets
- Die Cut (camera-ready copy must show location of perforation line or lines)
- Scored for folding (camera-ready copy must show location of scoring)
- Perforation (camera-ready copy must show location of perforation line or lines)
- Folded per attached instructions

Special Printing Instructions:

The attached form is hereby authorized for printing and distribution according to the print specifications.

_____ Date _____ IS Department