



**CHARLES COUNTY PUBLIC SCHOOLS
PROJECT APPROVAL FORM FOR BIDDING**

Project Title: _____

Brief Description of Project: _____

Estimated Project Cost: \$ _____

Budget Code(s): _____

Date

**Department Head/
Supervisor** _____

**Assistant Superintendent/
Deputy Superintendent/
Superintendent** _____

**Carole Koller
(CIP & General Funds)** _____

NOTE: Please obtain all required signatures and submit completed form to the Purchasing Dept. for processing.