**AGENDA REQUEST FORM**

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| --- | --- | --- | --- |
| Name of Requestor: |  | Department/Office: |  |
| Address:(IF NOT A COUNTY EMPLOYEE) |  | Email Address:Telephone Number: |  |
| Date of Request: |  | Date of Meeting: |  |
| Matter of Request: |  |
| Documents Attached: |  |
| **COMPLETE THE FOLLOWING IF SUBMITTING A CONTRACT/AGREEMENT** |
| Is this a Renewal? | If yes, what is the expiration date? |  |
| If no, what is the proposed expiration date? |  |
| Are the terms the same as the prior contract? | [ ] YES or [ ] NO |
| If no, describe what has changed? |  |
| Amount of Contract: |  | Fund to be Paid From: |  |
| Has the Other Contractual Party Signed the Document? | [ ] YES or [ ] NO |
| Has the Document been Reviewed by Counsel for Approval? | [ ] YES or [ ] NO |

Please email this completed form for consideration, along with all supporting documentation to Mila Shaffer at mshaffer@co.hendricks.in.us, or hand deliver to the Commissioners’ Office.

**The Agenda Request Form submission deadline is 2:00 PM on the Thursday prior to each Commissioners’ Meeting, except when affected by a County Holiday or an Emergency Closing. For exact deadline dates, please review the Agenda Request Form submission dates noted on the Commissioners’ Calendar of Submission Deadline Dates for Agenda Requests and Staff Reports.**