

395 Guernsey Lane, Red Wing, MN 55066 · Phone 651.388.4441 · Fax 651.388.9557 Member Districts: Cannon Falls #252 · Goodhue #253 · Kenyon Wanamingo #2172 · Lake City #813 · Red Wing #256 · Zumbrota Mazeppa #2805

River Bluff Education Center – External Items Request for Approval Items not provided by GCED must get approval to be brought into buildings and classrooms.

Person Requesting:______Building:

Date:_____

Room/Office Number:_____

Furniture Request

Requested Furniture Item(s):_____

If lamps or furniture are requested, please initial the applicable statement to verify your agreement:

- I understand that any approved lamps must have a LED bulb, as incandescent and halogen are not allowed.
- I understand that used furniture is not allowed due to the unknown animal dander and allergens that may come with it.

Plant Request

Requested Plant(s):_____

Please initial each statement, below, to verify your agreement:

- _____ I understand that there is a max of 6 plants for a typical 900-1000 square foot classroom.
- _____ I understand that I must replace the soil every 3-6 months to alleviate mold issues.
- I understand that if there are any concerns with the care of the plants by administration, custodial staff, or building
- and grounds staff, the plant will need to be removed.
- I understand that the plants must be removed at the end of the school year.

Animal Request

Requested Animal(s):_____

- 1. Is this is a single day visit, a recurring visit, or a continuous stay?
- 2. Name/type of animal(s):_____
- 3. Educational Purpose:
- 4. How will parents/guardians and students be informed of the animal?

Please initial each statement, below, to verify your agreement:

- 1. I understand that I am responsible for the cleaning, feeding, and upkeep of the animal/cage/tank/etc. including vacations and holidays, where applicable.
 - 2. I understand that if there is pet food involved, it must be stored in a secure location.
- 3. I understand that if there are any staff, parental, or student concerns, the animal will need to be removed or accommodations made.
 - 4. I understand that if any sensitivities or allergies occur, the animal will need to be removed.
- 5. I understand that if there are any concerns with the care of the animal by administration, custodial staff, or buildings and grounds staff, the animal will need to be removed.
- 6. I understand that the animal must be removed at the end of the school year.

Please email this completed attachment to GCED Human Resources (<u>bcashman@gced.k12.mn.us</u>).

Approval 1 (Program Administrator) Approved_____ Denied_____ Signature:______ Approval 2 (Buildings and Grounds)
Approved_____ Denied_____
Signature: _____