



NORTHEASTERN CATHOLIC DISTRICT SCHOOL BOARD
383 BIRCH STREET NORTH, TIMMINS, ON P4N 6E8
TEL: 705-268-7443 FAX: 705-267-3590

DISTRIBUTION OF MATERIAL AUTHORIZATION FORM

ORGANIZATION: _____

CONTACT PERSON: _____

DATE: _____ PHONE: _____

EMAIL ADDRESS: _____

Copy submitted:

☐

YES

☐

NO

Content(s):

Requester's Signature: _____

Please email completed copy of this request to reception@ncdsb.on.ca

For Office Use Only Approval of	Notes
<input type="radio"/> Distribution	<i>It is the responsibility of the requester to provide ALL copies to be distributed.</i>
<input type="radio"/> Refusal	<i>A copy of this form must accompany EACH package to be distributed.</i>
Reason: _____ _____ _____ _____	<i>You may attach an electronic version of your document for distribution as well.</i>
_____ Tricia Stefanic Weltz, Director of Education	<i>Please be advised that the information with respect to our schools' information will be made available following approval this form.</i>