PARENT ORGANIZATION INFORMATION SHEET

Send an updated copy of this form to your school principal and to the CISD Internal Auditor as new officers are elected or as information changes.

1. **Organization Name** _____
2. **School Name:** _____
3. **Employer Identification Number (EIN):** _____
4. **Official Mailing Address:**

   PO Box / Street Address: _____

   _____

   City, State, Zip: _____
5. **Date of Change:** _____/_____/_____
6. **Current Organization Officers for the** _____**School Year**
7. **Club Sponsor (If PTO/PTA, please list school Principal)**

   Name: _____ Email: _____

Office Held:		
Printed Name:		
Phone Numbers:	**Home:**	**Other:**
Email Address:		

Office Held:		
Printed Name:		
Phone Numbers:	**Home:**	**Other:**
Email Address:		

Office Held:		
Printed Name:		
Phone Numbers:	**Home:**	**Other:**
Email Address:		

By law, information on this page is public information and must be released to the public at such request

PARENT ORGANIZATION INFORMATION SHEET

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8. Current Organization Officers (continued):

Office Held:		
Printed Name:		
Phone Numbers:	**Home:**	**Other:**
Email Address:		

Office Held:		
Printed Name:		
Phone Numbers:	**Home:**	**Other:**
Email Address:		

Office Held:		
Printed Name:		
Phone Numbers:	**Home:**	**Other:**
Email Address:		

Office Held:		
Printed Name:		
Phone Numbers:	**Home:**	**Other:**
Email Address:		

Office Held:		
Printed Name:		
Phone Numbers:	**Home:**	**Other:**
Email Address:		

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