



COLUMBIA PUBLIC SCHOOLS
ADOPT-A-SPOT BEAUTIFICATION PROGRAM
VOLUNTEER APPLICATION

Date: _____

Name of Person or Organization: _____

Contact Person: _____

Address of contact person: _____

Telephone: Day: _____ Cell: _____

E-mail: _____

Location of Project: _____

Description of proposed project: _____

I agree to adopt and maintain the above designated area. If I am unable to maintain the area, I agree to find a permanent replacement or will burden the costs associated with bringing the site back to the original configuration prior to incorporation.

Applicant Signature: _____ Date: _____

The following section if for Office Use only:

Reviewed by: _____

Beautification project recommendation: Approval _____ Disapproval _____

By: _____ Date: _____

Return completed form to the Facilities and Construction Services Building

5909 Paris Road, Columbia MO 65202 or FAX 214-3761