

**REAP** CENTRAL  
PLATEAU

**200-**

(Rural Education Activities Programme)

Rural Education Activities Programme  
**REQUEST FORM**

This form should be returned to :

**Schools' Co-ordinator  
Central Plateau REAP  
P.O. Box 1000  
TAUPO**





# Summary of Requests

**From:** \_\_\_\_\_  
(school, group or organisation)

**Principal:** \_\_\_\_\_  
\_\_\_\_\_  
(include name, contact phone and address)

**Date:** \_\_\_\_\_

**List Programmes in order of priority**

Proposed Programme	Time	Travel	Expenses	Total	Office Use Only App. No.
1					
2					
3					
4					
5					
6					