



BRANDON SCHOOL DIVISION

Office of Communications Media Information Request Form

Name of Media Outlet: _____
Name of Reporter: _____
Deadline: _____

Phone Number: _____
Alternate Phone: _____
Email Address: _____
Preferred Method of Contact
 Telephone Email

Topic and Story Context:
(What is the story about, how is it being framed, who else are you talking to in order to obtain information?)

Specific Questions:
(Please be as specific as possible)

Request Received By: _____

Date and Time Request Received: _____

Contact Information:
Brandon School Division Office of Communications
1031 6th Street, Brandon, MB R7A 4K5
Phone: 204-729-0388 Email: info@bsd.ca

“Accepting the Challenge”