



VIBE PUBLIC COMMENT FORM

Date of Suggestion/Comment/Request: _____ Request Directed to _____

Suggestion/Comment/Request:

The information below is optional, and is kept confidential. Your privacy and the confidentiality of your 'personal information' are important to us. We are committed to protecting your privacy by responsibly collecting, using, storing and disclosing the personal information we may hold about you in a manner consistent with the VIBE's Privacy Policy.

Your Name _____ Organization _____

Address _____ City/State/Zip _____

Phone _____ Fax _____ Email _____

Once completed, this form should be sent to the VI Board of Education in any of the following ways:

Deliver/Mail to:	Fax to:	Email:
St. Croix: Sunny Isle Professional Building Suites #5 & #6 Christiansted, St. Croix USVI 00820	340-772-2895	stx@myviboe.com
St. Thomas: P.O Box 11900 #8 Estate Ross Barbel Plaza St. Thomas, USVI 00801	340-774-3384	stt@myviboe.com

FOR OFFICE USE ONLY:

Action required:

- Send acknowledgement notice to submitter (within 3 days) _____ / _____ / _____
- Submit to Committee (within 3 days) _____ / _____ / _____
- Board review _____ / _____ / _____
- Provide feedback to submitter on decision (within 10 days) _____ / _____ / _____

Government of the Virgin Islands
 Virgin Islands Board of Education

