

Must be received at Central Office NLT than Wednesday (1 week prior) to the board meeting

FUND RAISING FORM  
Simpson County Schools

School: Franklin-Simpson Middle School

Activity Fund: Student Council

FEB 08 2019

Sponsor: Mary Beth Schlosser

Date Submitted: 2/8/19

What grade range will be involved in this activity? \_\_\_\_\_

State the one MAIN purpose of this fund raising activity (how will students benefit from participating in this activity?):

\_\_\_\_\_ Educational experience \_\_\_\_\_ School spirit \_\_\_\_\_ Community service

☒ Fund Raising \_\_\_\_\_ Other: \_\_\_\_\_

Describe Activity: Bracelets will be sold to raise money to support Renaissance activities.

Beneficiary of fund raising activity: Student Council/Renaissance team

Place of Activity: ESMS

Date(s) of Activity: April/May Time(s) of Activity: lunch/home room

Names of adult supervisors at activity (chaperones, custodians, etc.): \_\_\_\_\_

Mary Beth Schlosser Justin Mitchell

[Signature] 2/8/19  
Principal Date

SBDM Council (if Council Policy) \_\_\_\_\_ Date \_\_\_\_\_

Superintendent \_\_\_\_\_ Date \_\_\_\_\_

Board Approval Date \_\_\_\_\_ Not Approved