

Must be received at Central Office NLT than Wednesday prior to the scheduled board meeting

FUND RAISING FORM  
Simpson County Schools

OCT 30 2019

School: Y.S.H.S

Activity Fund: Candy (project Graduation)

Sponsor: Project Graduation

Date Submitted: 10-30-19

What grade range will be involved in this activity? Seniors + Parents

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: Project Graduation Class 2020  
candy sales

Beneficiary of fund raising activity: Project Graduation Class  
2020

Place of Activity: School

Date(s) of Activity: 2019-2020 Time(s) of Activity: \_\_\_\_\_

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

Seniors + Seniors Parents

[Signature] Principal Date 10.30.19

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

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

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