

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

FUND RAISING FORM

Simpson County Schools

School: Franklin Simpson High School

Activity Fund: HOSA

Sponsor: Cynthia Phillips ; Lisa Hopson

Date Submitted: 11/19/19

What grade range will be involved in this activity? 9-12

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: DQ night, pizza hut night, Zaxby's night, Sundt cakes

Beneficiary of fund raising activity: HOSA members 19-20 school yr.

Place of Activity: varies

Date(s) of Activity: varies 1-7-20 Time(s) of Activity: evening

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

Ashley Johnston Lisa Hopson

Cynthia Phillips

Principal 11.18.19

SBDM Council (if Council Policy) _____ Date _____

Superintendent _____ Date _____

Board Approval Date _____ Not Approved