

Exhibit - Request for Establishment of Student Activity Fund

To be submitted to the Business Manager

Permission is hereby requested to establish a Student Activity Fund for the purposes below:

School Name Chiddix Junior High School
Student Activity Fund Name FCCLA

To be completed by Accounting Department:

Account Number - Revenue _____
Account Number - Expenditure _____

1. The purpose of the proposed Student Activity Fund is purchase supplies for community service projects
2. Income in support of this Student Activity Fund will be obtained from the following sources:
cash/check
3. Expenditures from this Student Activity Fund will be for these purposes: purchasing supplies for proposed community service projects
4. **Authorized Signatures:**
The following individuals are authorized to initiate expenditures from this fund:
N/A Emily Lewis
Student Representative Faculty Advisor
5. Other Comments: _____

Christina Mables
Principal

This request was approved by the Board of Education on _____

Business Manager

Date

Exhibit - Request for Establishment of Student Activity Fund

To be submitted to the Business Manager

Permission is hereby requested to establish a Student Activity Fund for the purposes below:

School Name Chiddix Junior High School

Student Activity Fund Name Illinois Democracy

To be completed by Accounting Department:

Account Number - Revenue _____

Account Number - Expenditure _____

1. The purpose of the proposed Student Activity Fund is to house grant funds for the Illinois Democracy funds we are receiving.

2. Income in support of this Student Activity Fund will be obtained from the following sources:

Illinois Democracy grant

3. Expenditures from this Student Activity Fund will be for these purposes: _____

Funds for social-emotional support, sub coverage for team meetings, resources supporting student voice and belonging.

4. Authorized Signatures:

The following individuals are authorized to initiate expenditures from this fund:

N/A Jim Broach
Student Representative Faculty Advisor

5. Other Comments: _____

Christina Mables
Principal

This request was approved by the Board of Education on _____

Business Manager

Date

Exhibit - Request for Establishment of Student Activity Fund

To be submitted to the Business Manager

Permission is hereby requested to establish a Student Activity Fund for the purposes below:

School Name Chickadee Junior High School
Student Activity Fund Name Health + Wellness Club

To be completed by Accounting Department:

Account Number - Revenue _____
Account Number - Expenditure _____

1. The purpose of the proposed Student Activity Fund is collect club dues and donated money for student supplies/activities.
2. Income in support of this Student Activity Fund will be obtained from the following sources: student fees and any donated money
3. Expenditures from this Student Activity Fund will be for these purposes: Wellness supplies, healthy snacks, and any activity fees for students.
4. **Authorized Signatures:**
The following individuals are authorized to initiate expenditures from this fund:

_____ Student Representative	<u>Nick Papineau</u> Faculty Advisor
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5. Other Comments: _____

Christina Mables
Principal

This request was approved by the Board of Education on _____

Business Manager

Date

Exhibit - Request for Establishment of Student Activity Fund

To be submitted to the Business Manager

Permission is hereby requested to establish a Student Activity Fund for the purposes below:

School Name Normal Community West High School

Student Activity Fund Name West Makerspace

To be completed by Accounting Department:

Account Number - Revenue _____

Account Number - Expenditure _____

1. The purpose of the proposed Student Activity Fund is to collect funds from internal
departments / funds in order to provide makerspace usage / supplies / services.

2. Income in support of this Student Activity Fund will be obtained from the following sources:
Internal depts. / clubs / funds from Normal Comm. West / Unit 5 via makerspace usage.

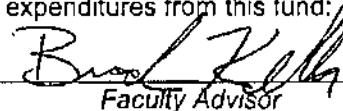
3. Expenditures from this Student Activity Fund will be for these purposes: re-ordering
consumables, maintaining equipment, purchase of additional equipment to expand services
offered by the West Makerspace

4. Authorized Signatures:

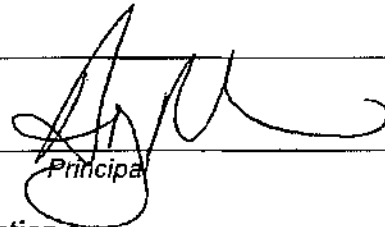
The following individuals are authorized to initiate expenditures from this fund:

N/A

Student Representative


Faculty Advisor

5. Other Comments:


Principal

This request was approved by the Board of Education on _____

Business Manager

Date