AMPHITHEATER PUBLIC SCHOOLS PARENT SUPPORT ORGANIZATIONS ANNUAL APPLICATION FOR GOVERNING BOARD APPROVAL

118	ganization CDO International Baccal	Laureate Org. School CDO High School
Related Stud	dent Organization or Club CDO IB Program	
OFFICERS:		,
Name:	Stacey Fox	Name: Billie Meuschke
	: President	Office Held: Treasurer
Address:		Address:
	J	
E-mail:		
Phone(s):		
Name:	office: 8/7/17	
Office Helds	Cassandra Hunt	Name: Jenny Basye
Address:	Vice President - Events	
Address,		Address:
Phone(s):		Phone(s):
, .	office: 8/7/17	Date taking office: 9/10/16
	UNAL OFFICERS, PLEASE ADD A SEPAR	
	7) Most recent tree 8) Most recent bar	
○ Informal N	Ion-Profit Please Attach: 1) Annual budget, g 2) Current operating 3) Most recent tree	goals and objectives ng by-laws asurers financial report
4	4) Most recent ban	k statement
Are two signatu	res required on disbursements?	
Member meetin	gs held how often? One a Quarter	(• Yes (No
		Executive meetings held how often? Monthly
training, and fol	yow the district's Guidelines For Operation A	anization, attend annual district-provided Parent Support Group and Financial Responsibility while we strive to improve our
childken seduca	nional apportunities where support is needed.	na Financial Responsibility while we strive to improve our
XXX)	New Ste 9/6/0	
Signature	Date /	Signature
	40 9/6/1-1	Date
Signature	Date	Signature
Site Administrator's	Approval: Fully Salvers Signature	9/7/17
	Oignatute	Date
For district use:	Fil	
THE POP HAIC,	Finance Department recommendation	on: approvel

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Print Form

AMPHITHEATER PUBLIC SCHOOLS PARENT SUPPORT ORGANIZATIONS ANNUAL APPLICATION FOR GOVERNING BOARD APPROVAL

School Year 2017-2018			
Name of Organization Project Graduation - IRHS	School Ironwood Ridge HS		
Related Student Organization or Club	Taxpayer I.D. 11-3660162		
OFFICERS:	*		
Name: Dede Betten	Name: Colleen Vance		
Office Held: President	Office Held: Treasurer		
Address:	Address:		
3.			
E-mail:	E-mail:		
Phone(s):	Phone(s):		
Date taking office: 7-1-17	Date taking office: 7-1-15		
Name: Stefani Noe	Name: Kyle Hansen		
Office Held: Event Co-Chair	Office Held: Secretary		
Address:	Address:		
Phone(s):	Phone(s):		
Date taking office: 7-1-17	Date taking office: 7-1-15		
FOR ADDITIONAL OFFICERS, PLEASE ADD A SEPARATE, ATTACHED SHEET. Please Attach: 1) Articles of Incorporation (first year only) 1) I.R.S. Determination Letter (first year only) 3) Annual budget, goals and objectives 4) Current operating by-laws 5) Last fiscal year AZ Corporation Commission Annual Report 6) Last fiscal year I.R.S. Form 990 Annual Report 7) Most recent treasurers financial report 8) Most recent bank statement C Informal Non-Profit Please Attach: 1) Annual budget, goals and objectives 2) Current operating by-laws 3) Most recent treasurers financial report 4) Most recent bank statement			
	No By-laws reviewed annually? • Yes No		
Member meetings held how often? Monthly	Executive meetings held how often?Monthly		
As officers, we hereby agree to abide the By-Laws of our orgatraining, and follow the district's Guidelines For Operation A children's educational opportunities where support is needed. Signature Date Signature Signature Signature Signature Signature Signature Date	* *		
For district use: Finance Department recommendat	ion: 908V2		

Governing Board Agenda date: 4 \4\1

