

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

School Year 2016-2017

Name of Organization Innovation Academy PTO

School Innovation Academy

Related Student Organization or Club _____

Taxpayer I.D. 81-5279072

OFFICERS:

Name: Vincent Pike
Office Held: President
Address: 13060 N. Cathedral Drive
Oro Valley, AZ 85755
E-mail: vincepike@gmail.com
Phone(s): 520-780-0353

Name: Jeremy Carter
Office Held: Treasurer
Address: 12986 N. Westminster Dr.
Oro Valley, AZ 85758
E-mail: Jeremyscarter@gmail.com
Phone(s): (910) 233-7058

Date taking office: 2/1/2017
Name: Jennifer Fa
Office Held: Vice President
Address: 1258 W. Molinetta Dr
Oro Valley, AZ 85755
Phone(s): (520) 321-0141
Date taking office: 2/1/17

Date taking office: 2/1/2017
Name: Kathryn Koenig
Office Held: Secretary
Address: 87 E. Loch Lomond Place
Oro Valley, AZ 85737
Phone(s): 520-440-11030
Date taking office: 2/1/17

FOR ADDITIONAL OFFICERS, PLEASE ADD A SEPARATE, ATTACHED SHEET.

- Formal Non-Profit Please Attach:
- 1) Articles of Incorporation (first year only)
 - 2) 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

- 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

Are two signatures required on disbursements? Yes No By-laws reviewed annually? Yes No

Member meetings held how often? Monthly Executive meetings held how often? As Needed

As officers, we hereby agree to abide the By-Laws of our organization, attend annual district-provided Parent Support Group training, and follow the district's Guidelines For Operation And Financial Responsibility while we strive to improve our children's educational opportunities where support is needed.

Signature [Signature] Date 2/1/2017
Signature [Signature] Date 2/1/2017
Site Administrator's Approval: [Signature]
Signature _____ Date _____

Signature [Signature] Date 2/1/2017
Signature [Signature] Date 2/1/17
Signature _____ Date _____

For district use: Finance Department recommendation: approval
Governing Board Agenda date: 2/2/17