ST. JOHNS COUNTY SCHOOL DISTRICT

Department for Planning, Accountability and Assessment

3015 Lewis Speedway, Unit 3 St. Augustine, Florida 32084

Telephone (904) 547-8911 Fax: (904) 547-8915



School Advisory Council Request for the Use of Funds Requests must be made 1 week prior to the SAC Meeting

Date:	Requested by:		
Purpose of the funds req	uested:		
What Part of the School	Improvement I	Plan will these	e funds address?
How will you measure in	ts effectiveness	or impact?	
110w will you measure i	is circuiveness	or impact.	
provide a 5 minute prese teaching you are able to	entation on how provide. Do yo	it has been uou agree to th	dvisory Council, you will be required to seed to improve the school and/or the quality is? YES NO
How much funding supp			
EXPENSE	COSTS	DATE NEEDED	Description
Materials Needed	\$		
Technology Needed	\$		
Registration Fees	\$		
Travel Expenses	\$		
Hotel Expenses	\$		
Per Diem	\$		
Other	\$		
Other	\$		
TOTAL	\$		
ate Presented to SAC: _		Rec	quest Approved Request Denied
AC Chair Signature		Priı	ncipal Signature

St. Johns County Schools Department of Planning and Accountability