

## **Palliser School Division**

## **Palliser Centre**

#101, 3305 - 18 Avenue North, Lethbridge, AB T1H 5S1
Phone: 403-328-4111 Toll-free: 877-667-1234
Fax: 403-380-6890 www.pallisersd.ab.ca

## FORM A: SCHOOL COUNCIL ANNUAL REPORT to be completed by all School Councils

School Year:							
School Name:							
	SCI	HOOL COUN	ICIL MEMBE	ERS			
Chair:							
Vice-Chair:							
Secretary:							
Treasurer:							
Others:							
<b>Meeting Dates</b> : Plea	se list the	dates of all s	chool counc	il meetings	s held in the y	/ear.	
(Minutes must be kep	ot for 7 yea	ırs and be av	⁄ailable upon	request).			

Activities:		

Council Activities: Please provide an outline of the major activities of the school council

during the past year.

**Financial Statement:** If the school council handled money other than the ASCE Grant, please complete Form B: SCHOOL COUNCIL STATEMENT OF RECEIPTS AND DISBURSEMENTS

**Alberta School Council Engagement (ASCE) Grant**: Please indicate if the engagement grant funds were spent during the above noted school year.

- Yes (if yes, the ASCE Grant information below must be completed)
- No

	ASCE GRANT*						
	Grant Revenue Received:						
	Grant Funds Expensed:						
	Grant Funds Remaining:						
	Brief description of Use of Funds:						
*I	Please ensure you keep records well as any unused funds at	ls of expenditures to demonstrate approved use of fun time of reporting.	ds				
S	chool Council Chair (print name)	Principal (print name)					
S	chool Council Chair (signature)	Principal (signature)					