**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 <u>www.pallisersd.ab.ca</u>

## SCHOOL COUNCIL ANNUAL REPORT

School Year:	
School Name:	

SCHOOL COUNCIL MEMBERS				
Chair:				
Vice-Chair:				
Secretary:				
Treasurer:				
Others:				

**Meeting Dates:** Please list the dates of all school council meetings held in the year. (Minutes must be kept for 7 years and be available upon request).

Date:	Date:	Date:
Date:	Date:	Date:
Date:	Date:	Date:



**Council Activities:** Please summary an outline of major activities of the school council during the past year.

Activities:

**Financial Statement:** Please attach, if any, a financial statement for all money that was handled by the school council during the past year.

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:		

\*Please ensure you keep records of expenditures to demonstrate approved use of funds as well as any unused funds at time of reporting.

School Council Treasurer	(print name)
--------------------------	--------------

Principal (print name)

School Council Treasurer (signature)

Principal (signature)