
School Advisory Council (SAC)

Request for School Improvement Funds

Amount:

Date Presented to SAC:

From:

Request:

SIP Goal & Relationship Of The Request To The SIP (Highest Student Achievement, Safe Schools or Increasing FCAT):

Result Measurement (How Is The Result Measured)?

Participation On SIP Writing Team: _____ Yes _____ No

Vote of SAC:

Date Of SAC Meeting:

SAC Notes:

