

**CLEVELAND CITY SCHOOLS
SCHOOL SUPPORT ORGANIZATION ANNUAL INFORMATION FORM**

This form must be submitted to the Director of Schools by August 1st each year.

Organization Name _____

Goals and Objectives of Organization:

(Required for initial filing or when information changes. Attach an additional sheet, if needed.)

Financial Policy: All funds raised by this organization will be deposited into a restricted school account as internal school funds and subject to the same guidelines and audit procedures as other school funds.

Contact Information for Support Organization's Officers:

(Required for initial filing and for annual renewal agreement)

SSO Position	Name	Address	Phone	E Mail Address

On behalf of the School Support Organization listed above, I certify that the information contained on this form is true and correct for the _____ school year.

Signature

Date

Printed Name and Position

Approved by Cleveland City Schools:

Signature

Date