



**Continuous Improvement Expenditure Plan  
2015-2016  
PARENT INVOLVEMENT PLAN**

**School:** Holmes

**Principal(s):** Luana M. Wesley

**Submit Date:**

**Status:** New

**Parent Involvement Focus Area(s):**

**Expected Outcome:**

**Scope and Sequence**

Ln	Dates	Description	Priority Area(s)
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**Line Status:** Waiting for plan to be submitted.

**Person(s) Responsible:**

**Frequency:**

**Identified Need:**

**Target Group:**

**Monitoring:**

**Personnel Summary:**

**Matl/Srvc Summary:**

	Cost	Statutory Benefits	Health Benefits	Project Totals
<b>SSC Approve Date:</b> SSC Approval not needed with funding used	0	0	0	0
<b>Certificated</b>	0	0	0	0
<b>Classified</b>	0	0	0	0
<b>Mtls/Srvc</b>	0			0
<b>Total</b>				<b>0</b>