Date: *<Insert Date of Board Meeting>*

For ACTION \_\_X\_\_\_

For INFORMATION \_\_\_\_

Board Agenda: Yes \_x\_

No \_\_\_

**FROM:** *<Insert Name>,* Chair

 *<Insert Committee Name>* Advisory Committee

**THROUGH:** *<Insert Name of Staff Liaison, Job Title>*

 *<Insert Name of Department Chief, Job Title>*

 *<Insert Name>,* Superintendent of Schools

**TO:** The Honorable *<Insert Name>*, Chair, and

Members of the Alexandria City School Board

**TOPIC: *<Insert Committee Name>* Annual Report for *<Insert Year>***

**SUMMARY**:

**BACKGROUND:**

**RECOMMENDATION:** The Superintendent recommends that the School Board approve the *<Insert Committee Name>* Annual Report for *<Insert Year>.*

**IMPACT:**

**ATTACHMENTS:** *<Insert Year> <Insert Committee Name>* Scope of Work

 *<Insert Committee Name>* Bylaws

 *<Insert any other attachments>*

**CONTACT:** *<Insert Committee Chair’s contact information>*