<b>AGENCY NAME:</b>	SC Governor's School for t	the Arts and Humanities	3
<b>AGENCY CODE:</b>	H640	SECTION:	1



Fiscal Year 2020-21 Agency Budget Plan

## FORM A - BUDGET PLAN SUMMARY

OPERATING REQUESTS (FORM B1)	For FY 2020-21, my agency is (mark "X"):  X Requesting General Fund Appropriations. Requesting Federal/Other Authorization. Not requesting any changes.
Non-Recurring Requests (Form B2)	For FY 2020-21, my agency is (mark "X"):  X Requesting Non-Recurring Appropriations. Requesting Non-Recurring Federal/Other Authorization. Not requesting any changes.
CAPITAL REQUESTS (FORM C)	For FY 2020-21, my agency is (mark "X"):  X Requesting funding for Capital Projects.  Not requesting any changes.
Provisos (Form D)	For FY 2020-21, my agency is (mark "X"):  Requesting a new proviso and/or substantive changes to existing provisos.  Only requesting technical proviso changes (such as date references).  Not requesting any proviso changes.

Please identify your agency's preferred contacts for this year's budget process.

	<u>Name</u>	<u>Phone</u>	<u>Email</u>
PRIMARY	Faye M. Schober	864-282-3738	fayeschober@scgsah.org
CONTACT:	VP Finance and Administration		
SECONDARY	Dr. Cedric L. Adderley	864-282-3785	cadderley@scgsah.org
CONTACT:	President		

I have reviewed and approved the enclosed FY 2020-21 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

	Agency Director	<b>Board or Commission Chair</b>
SIGN/DATE:	Educ & Addulas	Child Prosser
TYPE/PRINT NAME:		

This form must be signed by the agency head – not a delegate.