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## APPLICATION FOR STUDENT ORGANIZATION

School \_\_\_\_\_ Date of Application \_\_\_\_\_

Name of proposed organization \_\_\_\_\_

Name of student contact \_\_\_\_\_

What are the purposes and activities of the organization. Please be specific.

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Name of school staff person providing supervision \_\_\_\_\_

Anticipated number of students in organization \_\_\_\_\_

Anticipated frequency of meetings \_\_\_\_\_

Anticipated meeting times \_\_\_\_\_

Date \_\_\_\_\_ Student Leader \_\_\_\_\_

Date \_\_\_\_\_ Proposed Supervisor \_\_\_\_\_



Request Approved \_\_\_\_\_ Request Denied \_\_\_\_\_

Rationale and/or conditions: \_\_\_\_\_

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Date \_\_\_\_\_ Principal \_\_\_\_\_