

STUDENT ORGANIZATION PROPOSAL FORM

Please complete the form and submit to your building principal for consideration.

1. EMAIL: _____
2. TODAY'S DATE: _____
3. NAME OF ADVISOR: _____
4. NAME OF PROPOSED ORGANIZATION: _____

5. ORGANIZATIONAL PURPOSE AND GOALS: _____

6. ANTICIPATED NUMBER OF STUDENTS INTERESTED: _____
7. ANTICIPATED SCHEDULE FOR MEETINGS: _____

8. IS AN ACTIVITY ACCOUNT NEEDED IF APPROVED? Yes No

Adopted: 03/27/23
Reviewed:
Revised: