

RADNOR TOWNSHIP SCHOOL DISTRICT
REQUEST TO ESTABLISH A STUDENT ACTIVITY



1. NAME OF ORGANIZATION: _____

2. PURPOSE OR OBJECTIVE: (Briefly describe why this organization is being formed.)

3. BENEFIT: (Briefly describe how the students/District will benefit from the establishment of this organization.)

4. LEADERSHIP: (Briefly describe how this activity will be organized, how it will be run and whether the officers will be elected or appointed.)

5. FUND RAISING:

a. Will this organization raise funds?

Yes No

b. If "yes," briefly describe typical fund-raising activities and who will be involved.

6. USE OF FUNDS: (Briefly describe how these funds will be used to benefit the students or the District.)

7. FINANCIAL DEPENDENCE:

a. Will this organization require any financial assistance or facilities and equipment to be provided by the General Fund?

Yes No

b. If "yes," briefly describe the assistance needed and whether it is a continuing, year-to-year need.

8. FINANCIAL RESPONSIBILITIES: (Briefly describe who will be responsible for these funds and how fund-raising, expenditure and/or transfer decisions will be made.)

Submitted by: _____ Date: _____

Faculty Sponsor Name

Faculty Sponsor Signature

Principal Signature

Assistant to the Superintendent Signature

RADNOR TOWNSHIP SCHOOL DISTRICT
REQUEST TO ESTABLISH A STUDENT ACTIVITY



SCHOOL BOARD ACTION

NAME OF ORGANIZATION:

This request was:

Approved

Disapproved

By the School Board at their meeting held on:

Date

Reasons for disapproval or qualifications of approval, if applicable, were as follows:

Board Secretary Signature

Date