



Colorado Springs School District 11

REQUEST TO START A SCHOOL AUTHORIZED STUDENT GROUP

Name of Group: _____ **School Year:** _____

Name of Student Applicant: _____ **Name of Staff Adviser:** _____

Describe the primary focus and activities of the student group (use back of this form if necessary).

Please answer the following:

Y___ N___ Is the group's membership limited to current District 11 students and registered home school students who reside in the school's attendance area?

Y___ N___ Is the group operated for individual financial gain or for advertising any commercial project or product?

List the names and titles of officers for this school year (e.g., president, secretary, treasurer).

List any planned meeting days, times, and location (a majority of meetings must be held at school during the regular school day).

Are there dues or fees? If so, how much and what will these funds be used for?

List any planned fundraising events/activities, including dates and estimated revenues, for this group.

Please note that administrative supervision is required for any major event, and such events must be approved by the principal and scheduled on the school master calendar pursuant to school regulations.

I have read Policy JJA and Regulation JJA-R and agree to abide by their provisions:

_____ Date : _____
(Student Applicant's Signature)

_____ Date: _____
(Staff Adviser's Signature)

For Office use Only

Date Received _____

Status: Approved ____ Denied ____

Principal's or Designee's Comments _____

Principal's or Designee's Signature _____