

SUSQUEHANNA TOWNSHIP SCHOOL DISTRICT

ADMINISTRATIVE REGULATION

APPROVED:

REVISED:

122-AR-6. REQUEST TO ESTABLISH STUDENT ACTIVITY

NAME OF ORGANIZED STUDENT ACTIVITY: _____

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

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

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

FACULTY ADVISOR: (Name and Subject)

FUNDRAISING:

- Will this organization raise funds? No Yes
- If yes, briefly describe typical fundraising activities and who will be involved.

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

FINANCIAL DEPENDENCE:

- Will this organization require facilities or equipment to be provided by the school?
 No Yes
- If yes, briefly describe the assistance needed and whether it is a continuing, year-to-year need. _____

FINANCIAL RESPONSIBILITY: (Briefly describe who will be responsible for these funds and how fundraising, expenditure and/or transfer decisions will be made.) _____

♦ *Attach a copy of the Constitution or Bylaws that will govern this student activity.*

Request Submitted by _____ Date Submitted _____

Approved by _____ (Building Principal) Date Approved _____

SCHOOL BOARD ACTION

This request was Approved Denied by the School Board at its meeting held on

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

