



LOWER MORELAND TOWNSHIP SCHOOL DISTRICT

*An exemplary learning community...
committed to preparing and empowering all learners*

Proposal for Student Extra Curricular Activity or Club

Person submitting Form: _____

Contact Email: _____

Name of Activity or Club: _____

Classification: Athletic Non-Athletic

Status: New Change in Status Year 2 Year 3 Year 4

Description of Activity or Club and benefit to School/students:

Location/Time: _____

Dates: _____

Grade Levels: _____

Number of Students Involved _____

Staff Sponsor: _____

Cost:

Equipment Needed _____

Materials/Supplies Needed _____

Additional Costs _____

Do you plan to ask for School District funding for this activity next school year? No Yes

If yes, how much? _____

For Administrative Use Only:

Funding by Board of School Directors

Self-Supporting _____ Substantial Funding _____ Partial Funding _____

Number of Units (If Applicable – Year 4) _____

Activities Director Approval: _____

Principal Approval: _____

Date of School Board Approval: _____

**Return copies to: Admin Asst to Superintendent (needs board approval) Admin Asst to Principal, Sponsor, Athletic Director, and Applicant