

White Plains High School - Group Formation Form



Group Name: _____

MISSION STATEMENT: *This statement defines the group purpose, goals, and how this group will impact the students at White Plains High School.*

The petition must be signed by 10 students:

Print Name	Signature	Grade
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

The petition must be signed by a staff member who agrees to supervise the group.

Print Name	Signature

Date Submitted: _____

SGO Date Approved: _____

Administrator Approval Date: _____