SECONDARY SCHOOL STUDENT ORGANIZATION
Curriculum & Non-Curriculum Related - Application

Name of the organization _____

Name(s) of the faculty sponsor(s) _____

Will this student organization be curriculum related? _____ Yes _____ No

Give a general statement of the purposes of the organization. Include a copy of the bylaws if they are available. If curriculum related, a reference must be made to a specific class of other elements of the educational program.

If non-curriculum related, will this organization include religious worship, prayer or practice identified as having a religious purpose? ____ Yes ____No

Give a description of the qualifications for membership in this organization, if any.

Will any sponsors or other persons who are not students enrolled in the district directly control the meetings of this organization? _____ Yes _____ No

Will anyone other than students enrolled in the district and the sponsor attend the meetings of this organization on a regular basis? (More than three meetings would be considered regular attendance.) _____ Yes _____ No

Describe the role of the faculty sponsor in the promotion, supervision and leadership of the organization.

I have completed this application to the best of my knowledge and agree to follow the procedures for a student organization should this application receive approval from the building principal. Faculty sponsors must participate in the supervision and direction for all activities of the organization and shall attend all meetings.

I agree to follow the guidelines and rules for scheduling meetings of this student organization and understand any activity which is contrary to law, district policy or school rules, or which disrupts or clearly threatens the orderly operation of the school, or which adversely affects the health, safety or welfare of any students or staff members will be cause for revocation of the right to continue to conduct meetings under this policy.

_____ _____

Student representative Faculty sponsor

I have read this application and believe it meets the intent of a curriculum related/non-curriculum student organization. Therefore, I give permission for this organization to meet according to the school guidelines, during the _____ school year.

Staff have reviewed BoE Policies: JJ, JJR, and JJA ___ Yes ___ No

_____ Approved _____ Denied

_____ _____

Principal Signature Date

_____ _____

Athletic/Activity Director Date

Send a copy to the Athletics/Activities office at the Administration Building.

_____ _____

Risk Management Date

_____ _____

Director of Athletics & Activities Date

_____ Approved _____ Denied

Updated: 7/24