

STUDENTS

Curricular and Non Curriculum Related Student Groups

Please complete the following form and submit it to the Principal at least one-week prior to the proposed meeting(s).

Name(s) of student(s) making the request

Name of the liaison of the proposed group (if any) _____

Description of the proposed meeting along with its stated purpose

Name(s) and affiliations of nonstudents (if any) who will be invited

Time and frequency of meetings for the proposed group

I attest that all students who will be attending the meeting will be doing so voluntarily and that any nonstudents shall not be directing, conducting, controlling, or regularly attending future meetings and/or activities.

Student Signature(s)

Faculty Advisor or Liaison Signature