# Student-Initiated Club Process

***Directions:*** *To start the club approval process, please complete all parts of this club proposal.*

*Note: Your proposed club may not meet or organize before receiving confirmation that your club has been approved. Submit completed form to the principal for review by the administrative team. Once approved you must have a staff member present at all meetings/events. Once all the items below have been reviewed and/or completed, initial next to each item, sign* *the bottom of this form, and return a hard copy to the principal for review by the administrative team. Your proposed club may not meet until approval has been granted.*

 \_\_\_\_\_\_\_\_\_ Read [WCPSS Old Board Policy Manual: 6800](https://boardpolicyonline.com/bl/?b=wake_old#&&hs=189739)

\_\_\_\_\_\_\_\_\_ Read [WCPSS Old Board Policy Manual: 6800 R&P](https://boardpolicyonline.com/bl/?b=wake_old#&&hs=189740)

\_\_\_\_\_\_\_\_\_ Read [WCPSS Old Board Policy Manual 6801](https://boardpolicyonline.com/bl/?b=wake_old#&&hs=189741)

\_\_\_\_\_\_\_\_\_ Read [WCPSS Old Board Policy Manual: 6801 R&P](https://boardpolicyonline.com/bl/?b=wake_old#&&hs=189742)

 \_\_\_\_\_\_\_\_\_Read[WCPSS New Board Policy Manual: 5520](https://boardpolicyonline.com/bl/?b=wake_new#&&hs=420390)

 \_\_\_\_\_\_\_\_\_\_ Complete and submit the CFLEX New Club/Organization Proposal Form on page 2.

By initialing each item above and signing below, you state that you have completed each of the items required for review of your proposed club.

  

 Printed Name Date

 

Signed Name

# New Student-Initiated Club/Organization Proposal Form

All areas of this form must be filled out and submitted for the club/organization to be considered for approval.

Primary student making request \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Staff Advisor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Staff Advisor signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of club/organization \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *(The name of the club should be representative of the club’s purpose.)*

Is this club/organization a chapter of a national organization? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

 When will this club meet? How often will this club meet?

**Attach or email the following:**

* Purpose of the club: *(Include club mission, vision, goals and objectives. Describe how the club will benefit the students, the school, and/or the community.)*
* A list of major proposed activities for the club/organization to this document (Examples: guest speakers, service projects, field trips, etc.).

**Signatures are required of at least six potential students interested in being a member of this club.**

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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***Administrative Use Only***

 Approved for establishment at Crossroads FLEX HS (Note: student leader must email principal when the club is no longer functioning.)

 Not approved for establishment at Crossroads FLEX HS. See reason(s) below:

 Administrator Signature and Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_