

TWIN RIVERS UNIFIED SCHOOL DISTRICT
(Name of School)

Application for Student Club

I. We the students of the _____ (name of the school), request permission to form a Student Body Club. **Attach a list of the students sponsoring this application.**

II. This club will be called _____
and will have the purpose: _____

III. Mr./Ms. _____ (name of the certificated faculty member) will serve as the advisor for this club for the _____ school year.

IV. We have attached:
➤ A copy of the proposed constitution for this club.
➤ A copy of the proposed budget for this club for the school year.

V. Submitted by:
Student Club Representative: _____
Signature, Title and Date

Club Advisor: _____
Signature, Title and Date

Approved by:
School Principal: _____
Signature, Title and Date

ASB President: _____
Signature, Title and Date

Recorded in Student Council Minutes on (date): _____