



# Application for School-Sponsored Activity or Organization

Under District Policy IGDA-Student Activities and Organizations  
To be completed by an employee of the sponsoring secondary school

School:

Name of Proposed Activity or Organization:

Proposed Employee Sponsor:

Email Address:

Phone Number:

Please describe the purpose of the activity or organization:

Are there any academic qualifications for membership in the activity or organization?

Yes

No

If "Yes," please describe how the academic qualification(s) necessarily relate to the purpose of the activity or organization:

Are there any qualifications based on gender for membership in the activity or organization?

Yes

No

If "Yes," please describe how this qualification is necessary to preserve the health, safety or welfare of students OR why gender is a bona fide and integral qualification of the activity or organization:

Please list any school resources (other than a meeting room) and funding you anticipate will be needed to support this activity or organization:

Will this activity or organization be able to operate even if the school is unable to provide the funds or resources listed above?

Yes

No

Employee Sponsor's Signature:

Date:

**Principal Review:**

Recommend Approval

Recommend Approval with Changes

Recommend Denying

Recommended changes (e.g. meeting location, days and/or times) or reason for denial:

Principal's Signature

Date

- *If recommending approval, forward this Application to Risk Management.*
- *If denying, maintain this Application, with your signature, at the school.*

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**Risk Management Review:**

Request complies with District Policy

Request does not comply with District Policy

Comments, including where request is not compliant with District Policy:

Director of Records & Risk Management's Signature

Date

**Assistant Superintendent Decision:**

Approve as originally proposed

Approve with required changes

Denied

Requirements, reason for denial or other comments:

Assistant Superintendent's Signature

Date