



## Stoller Middle School

Date Submitted \_\_\_\_\_

### After School Club/Activity Proposal

Please return completed proposal to Principal Galvan for approval. A decision will be made about the proposed club within 10 school days.

Name of proposed club \_\_\_\_\_

Name of person(s) proposing club \_\_\_\_\_

Teacher or adult supervising the club \_\_\_\_\_

Phone Number \_\_\_\_\_

Email address \_\_\_\_\_

Back-up teacher or adult to supervise the club if the primary teacher or adult is absent \_\_\_\_\_

Phone number \_\_\_\_\_

Email address \_\_\_\_\_

Day of the week that the club will meet \_\_\_\_\_

Start and end dates of the club \_\_\_\_\_

Start and end time that club will be meeting \_\_\_\_\_

Location and/or room number \_\_\_\_\_

Total number of students \_\_\_\_\_

**Please note: If the club will be held after school, it is our intent that it be scheduled on Tuesdays or Thursdays. This accommodates our after-school activity bus, which leaves Stoller at 5:10 PM.**

Please give a brief description of the proposed club or activity. Please note if there will be a fee required.

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\_\_\_ Approved

\_\_\_ Denied

Principal's Signature: \_\_\_\_\_

Date: \_\_\_\_\_