



**Club and Co-Curricular
Information Sheet**

Club Name:	
Building:	
Advisor's Name:	
Weekly Meeting Schedule*:	<input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F From ____ to ____ (Check) (Month/Day) (Month/Day) *(If club does not meet 1x/week, please indicate meeting frequency)
Number of Students Served:	
Club Identified in LFT Contract:	<input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," Provide BOE Approval Date: <input type="checkbox"/>)
Club's Purpose:	
Rationale: What is the educational benefit? What would be the impact of a denial of approval? Feel free to attach additional supportive information.	

Advisor's Signature

Date

Principal's Signature

Date