

Anaheim Union High School District  
Education Division  
**APPLICATION FOR CURRICULUM-RELATED STUDENT  
ORGANIZATION**

CLICK AND ENTER DATA IN THE APPROPRIATE AREAS (DOUBLE CLICK SHADED BOXES)

**Name of Organization:**

**School:**

**Name(s) of student(s) making application:**

**Staff Sponsor(s):**

**List purposes, objectives, and activities of organization** (attach copy of Constitution and By-Laws)

**Proposed meetings:**

**Day(s):**

**Time(s):**

**Location:**

**Special equipment?** ☐ No ☐ Yes – Describe:

**Qualifications for membership, if any:**

**How are officers elected?**

**Term?**

**State relationship to curriculum and/or instructional program of the district, and describe**

how the organization will serve as an extension of or adjunct to the curriculum. Include specific reference to the courses of study, classes, or programs which the organization is intended to supplement; the instructional materials or learning resources which will be used; the skills, concepts, or attitudes which are planned to be developed; and the evaluation techniques which will be used to assess whether or not the objectives have been achieved:

**Describe the function of the staff adviser in the promotion, supervision, and leadership of the organization:**

**Will this organization be raising funds for any purpose?** ☐ No ☐ Yes – Describe how funds will be raised and for what purpose:

**The undersigned agree to comply with all applicable district policies, school guidelines, and rules, as adopted and amended:**

**Signature of student making application:**

**Printed name of student making application:**

**Signature of faculty sponsor:**

**Printed name of faculty sponsor:**

**Faculty sponsor: I have reviewed this application and**

☐ the application is complete ☐ the Constitution/By-Laws are attached

☐ the application is not complete (explain):

**Signature of School Principal:**

**Date:**

**Signature of Assistant Superintendent of Education:**

**Date:**

**Education Office Use Only:**

**Board of Trustees action:** ☐ Approved

☐ Denied

**Date:**

Submit completed form to the Assistant Superintendent of Education (mail location #15).