

PVIS Booster Club New Club Proposal

Teacher Name: _____ rm.# _____

Proposed Club Name: _____

Hours per Trimester: _____ (*please circle one*): lunch or after school

Day of the Week: _____

Additional Costs: Description and dollar amount: _____

_____ (*circle all that apply*) Tri1 Tri2 Tri3

Description of Club:

Please get the signature of at least 10 interested students:

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

7. _____ 8. _____

9. _____ 10. _____

Please return this form in to Becky Egan, Director of Activities, via the Front Office.

Clubs are approved based on student interest, available funding, and ability to meet the goals of PVIS Booster Club.

As you describe your club, please bear in mind the following criteria by which the Booster Club Board bases its decisions when approving programs for PVIS. You need not meet all of these criteria, but please understand they they are important guidelines.

1. The program is in keeping with the PVIS mission and vision.
2. There is an education component.
3. The program helps prepare PVIS students for high school.
4. The program reaches a reasonable number of PVIS students.

PVIS Mission Statement - To provide our youth with an educational environment that challenges all students to develop their social, emotional, and academic potential. That our students will respect one another, the diversity of our surrounding community and will come to desire life-long learning through modern strategies and resources together with enthusiastic staff members, involved parents and a supportive community.