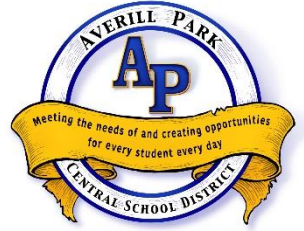


# AVERILL PARK CENTRAL SCHOOL DISTRICT

## Extracurricular Activity Form



Name of Club/Activity:

This is a ☐ new club ☐ existing club:

District goal(s) that this club supports: ☐ #1 Students will graduate college and career ready  
☐ #2 Students will productively engage in their school community

How will/did student participation and responsibilities in this club contribute to the school environment?

Please list the goals that this club hopes to accomplish in the next school year.

Please list the action plan for accomplishing these goals.

How does (or will) the club support itself financially?

If new club, is an extracurricular bank account needed?

Number of regular members:

Is regular attendance taken?

What other information would you like to share with the committee regarding this club?

Compensation level per APTA Contract:  
If no, what level is appropriate and why?

This level remains appropriate?

\_\_\_\_\_  
Signature of Advisor

Form must be received by principal by May 1st  
Forms will then be sent to the Superintendent of Schools.

\_\_\_\_\_  
Signature of Receipt by Principal