

~~Request for Extracurricular Activities~~

School Name _____

Teacher's Name _____

Teacher's Status/Number of Years of Experience _____

Extracurricular Assignment Request _____

Reason(s) for Requesting Assignment:

Teacher's Signature

Date

Request is Approved _____

Disapproved _____

Principal's Signature

Date

A copy of this request form will be filed in the superintendent's office.

**APPROVED BY BOARD
AND EFFECTIVE 11/1/99**