

MVHS Student Council Activity Pre-Approval Form

Name: _____

Date of Submission: _____

Position: _____

Committee Advisor: _____

Name of Event: _____

Potential Date(s) of event: _____ Times: _____

Description of event:

Proposed Budget for the event:

Anticipated Income		Anticipated Expenses	
Source	Amount	Item(s)	Cost
TOTAL:		TOTAL:	

Where you would need to hold the event: _____

Would need to seek approval from: _____

Because/for: _____

Would need to seek approval from: _____

Because/for: _____

Ways to publicize event:

List of supplies for event: (be sure if these are items to be purchased they are included in the budget proposal)

Jobs that need to be done in advance:

Amount of workers needed: _____

Jobs that need to be done that day:

Amount of workers needed the day of the event: _____

Other important details: (names and numbers of people you contacted, other lists)

C. Dixon _____

L. Droms / K. Murphy _____