

WELLSBORO AREA SCHOOL DISTRICT  
REQUEST TO ESTABLISH A STUDENT ACTIVITY

1. NAME OF ORGANIZATION: NHS Horticulture CTE/POS

2. PURPOSE OR OBJECTIVE: (Briefly describe why this organization is being formed.)  
Maintain separate account for CTE generated funds to be used to enhance CTE program

3. BENEFIT: (Briefly describe how the students/district will benefit from the establishment of this organization.)  
Ability to increase amount of materials purchased for projects

4. FUND RAISING: a. Will this organization raise funds? Yes  No   
b. If "yes", briefly describe typical fund-raising activities and who will be involved.  
flower sales, wreath projects

5. FINANCIAL RESPONSIBILITY: (who will be the advisor? How will fund-raising, expenditure and/or transfer decisions be made?)  
Melanie Bernatson

Date Submitted: 9/4/18  
Submitted by: Melanie Bernatson (Advisor) Approved by: [Signature] (Principal)

SCHOOL BOARD ACTION

This request was (Approved \_\_\_ Disapproved \_\_\_) by the School Board at the meeting held on \_\_\_\_\_.

Reasons for disapproval or qualifications of approval, if applicable, were as follows.

Date: \_\_\_\_\_ Secretary: \_\_\_\_\_

SUBMIT ORIGINAL TO BUSINESS OFFICE COPY WITH PRINCIPAL