

**Elk Grove High School**  
**Associated Student Body**  
**Checklist for Student Club**  
**Year \_\_\_\_\_**

Establishing a club is a three step process – Organizing, Application and Approval.

**STEP 1 - Organizing**

- Participate in Club Rush
- Schedule and hold an organizing meeting to complete the Application for Student Club
- Submit application to controller before the **deadline of Friday, 9/17.**

**STEP 2 - Application**

- Hold a second club meeting to:
  - Complete and approve bylaws
  - Elect officers
  - Complete and approve budget
  - Complete meeting minutes recording election and all approvals
  - Complete fundraising forms for each event
  - Complete Club Information Form
- Submit completed Club Information Form and required documents to controller before the **deadline of Friday, 10/1.**

*Please note: Failure to submit all required documents by this deadline will result in club not being officially recognized for this school year and club ASB account frozen.*

**STEP 3 – Approval**

- Controller will review package for completeness and submit to principal
- Principal will review and approve
- Controller will submit approved packages to ASB Council for approval.
- Controller will notify clubs of approval

# STEP 1

DUE 9/17 TO CONTROLLER  
WITH LIST OF INTERESTED STUDENTS

## Elk Grove High School Associated Student Body Application for Student Club Year \_\_\_\_\_

Complete this form at the first meeting after Club Rush indicating the intent to have an organized club on campus. Forward completed application and list of interested students to the controller by due date above. Once the application is approved by the principal the final club information form and required documents must be submitted.

I. We the students of the Elk Grove High School, request permission to form a Student Club. Attached is a list of the students sponsoring this application.

II. This club will be called \_\_\_\_\_  
and will have as its purpose: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

III. Mr./Ms . \_\_\_\_\_ (name of certificated faculty member) will serve as the advisor for this club for this school year.

IV. Required attachment: List of interested students.

V. Submitted by:

Student Club Representative: \_\_\_\_\_  
Signature, Title and Date

Club Advisor: \_\_\_\_\_  
Signature, Title and Date

VI. Approved by:

Principal/Site Administrator: \_\_\_\_\_  
Signature, Title and Date

# STEP 2

DUE 10/1 TO CONTROLLER  
WITH REQUIRED DOCUMENTS LISTED BELOW

**Elk Grove High School**  
**Associated Student Body**  
**Club Information Form**  
Year \_\_\_\_\_

(PLEASE PRINT)

Name of Club: \_\_\_\_\_

Name of Advisor: \_\_\_\_\_ Department of Advisor \_\_\_\_\_

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

Names of Club Officers:

President: \_\_\_\_\_

Vice-President: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

Day and Time of Club Meetings: \_\_\_\_\_

Place of Club Meetings: \_\_\_\_\_

Required Attachments:

- Copy of the student approved club constitution.
- Copy of the student approved club budget for the school year.
- Copy of meeting minutes showing approval of constitution and budget.
- Completed fundraising form for each event.

**SUBMIT FORM AND ATTACHMENTS TO CONTROLLER BY FRIDAY, 10/1!**

Approval:

Principal/Site Administrator: \_\_\_\_\_  
Signature, Title and Date

ASB President: \_\_\_\_\_  
Signature and Date

Recorded in Student Council Minutes on (date): \_\_\_\_\_

# Elk Grove High School Associated Student Body

## Club Budget

Year \_\_\_\_\_

Account Name \_\_\_\_\_

Account Number \_\_\_\_\_

Each club account operating through the ASB account must complete this form for the current school year. Please complete this form and submit it to the controller within 30 days from the start of school. If you need help completing this for please contact the controller.

**ASB Club/Account beginning balance on July 1st of current school year: \$ \_\_\_\_\_**

Item Description	Vendor	PO	Estimated Income	Estimated Expenses
Income				
Fundraiser 1:	Complete Fundraiser Worksheet			
Fundraiser 2:	Complete Fundraiser Worksheet			
Fundraiser 3:	Complete Fundraiser Worksheet			
Donations:				
Other: <i>(specify)</i>				
1				
2				
Expenses				
Tshirts				
End of year party				
End of year awards				
Other: <i>(specify)</i>				
1				
2				
3				
4				
<b>Totals for Income &amp; Expenses:</b>			<b>\$</b>	<b>\$</b>
<b>Current year profit/loss: <i>(estimated income less estimated expenses)</i></b>				<b>\$</b>

**Estimated year-end balance on June 30th of current school year: \$ \_\_\_\_\_**

Date approved by Club: \_\_\_\_\_

Signature of Club Student Rep.: \_\_\_\_\_

Signature of Club Advisor: \_\_\_\_\_

Date approved by ASB Council: \_\_\_\_\_

Required Signatures:

ASB Student Representative: \_\_\_\_\_

Activities Director: \_\_\_\_\_

Principal: \_\_\_\_\_

# ELK GROVE HIGH SCHOOL - ASSOCIATED STUDENT BODY

## FINANCIAL TRANSACTION FORM

### INSTRUCTIONS FOR COMPLETING FORM

1. Purchases may be made by purchase order or by check with prior approval and with proper documentation.
2. Request forms are to be turned in to the Controller's Office for processing at least 14 days prior to date needed.
3. PROHIBITED EXPENDITURES. In addition to Education Code 48934, which deals with the use of student body organization funds, it should be noted that certain expenditures are prohibited:
  - a. Equipment, supplies, forms and postage for curricular or classroom use or for district business.
  - b. Repairs and maintenance of district-owned equipment.
  - c. Salaries or supplies which are the responsibility of the district.
  - d. Articles for the personal use of district employees.
  - e. Gifts, loans, credit, or the purchase of accommodations for district employees or others.

**Date of Request:** \_\_\_\_\_ **Account Number:** \_\_\_\_\_

**Requested By:** \_\_\_\_\_ **Group/Team/Club:** \_\_\_\_\_

**Advisor:** \_\_\_\_\_

**Required for Student Organizations including Clubs, Councils, and ASB Council**

**Student Representative Signature:** \_\_\_\_\_

**A copy of meeting minutes with expenditure approval. Date approved:** \_\_\_\_\_

**The following transaction is requested:**

- Purchase Order (School will order and pay vendor. Requestor is to provide quote or estimate that includes sales tax and shipping.)
- Prior Approval (Required for all purchases not utilizing a PO.)
- Funds Transfer to ASB Account: \_\_\_\_\_
- Check (PRIOR approval must have been obtained. Original invoice, receipt, etc. must be attached)

**Date needed:** \_\_\_\_\_

**Mailing Instructions:**     Mail     Scan & email to \_\_\_\_\_

Will Pick Up     Teacher/Advisor Box     Fax to number: \_\_\_\_\_

**Vendor:** \_\_\_\_\_

(Enter the name of the person or company to whom the check/purchase order will be made payable. Individuals MUST have a bank account.)

**Attn:** \_\_\_\_\_ **Quote/Invoice Number:** \_\_\_\_\_

**Address:** \_\_\_\_\_  

Street Number/P.O. Box #/etc.
City
State
Zip

Quantity	Unit	Description	Unit Price	Total

<b>Date of Meeting When Approved:</b> _____ / _____ / _____	Sub-Total	
<b>Required Signatures:</b>	Discount (enter as negative number)	
ASB Student Representative: _____	Sales Tax 7.75%	
Activities Director: _____	Shipping	
Principal: _____	<b>TOTAL</b>	

## ELK GROVE HIGH SCHOOL FUNDRAISER WORKSHEET

**Student Sponsored Fundraiser**

**Booster Sponsored Fundraiser**

Complete this worksheet no later than 60 days PRIOR to date of fundraising activity. Activity must be approved PRIOR to committing/obligating any funds for the activity. Students are not required to participate in fundraisers and no minimum quantity or sales are required of students that do participate. Students are not to solicit door-to-door. No single serving candy sales authorized.

Student sponsored fundraisers: For each item listed as an expense a PO request with estimates, quotes, etc. and facilities use form must be attached to this worksheet.

**Sponsoring Group/club/booster name:** \_\_\_\_\_ **Date submitted:** \_\_\_\_\_

**Describe the fundraiser:** \_\_\_\_\_

**Proceeds to be used for:** \_\_\_\_\_ **Posted to**  **Team**  **Student Account**

**Type of fundraiser:**  **Dance**  **Performance**  **Carwash**  **Tournament/Camp**  **Candy/Cookies**

**Other:** (specify) \_\_\_\_\_

**Location:** \_\_\_\_\_ **Start date:** \_\_\_\_\_ **End date:** \_\_\_\_\_

**Advisor/Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Income/Expenses Estimates**

	Vendor	Income	Expenses	FTF Completed
<b>Income</b>				
General funds (current funds available)				
Item Sales (estimated number _____ x price \$ _____)				
Donations (specify)				
Other (specify)				
<b>Expenses</b>				
Facility/venue				
Decorations				
DJ/Officials				
Entertainment (specify)				
Food				
Other (specify)				
Other (specify)				
Other (specify)				
Transportation				
Kitchen \$24 avg per hr (estimated hours) _____	EGUSD			
Custodial \$33 hr/Sat # hrs: _____ \$44 /Sun # hrs: _____	EGUSD			
Security				
Campus Security 1/50 people/\$26 avg p/hr after school/wkends (# hrs) _____	EGUSD			
Off-duty Sac Co Sheriff req for multi-school events \$68 hr (# hrs) _____	Sheriff			
Advisor substitute \$180 avg per day (estimated # days) _____	EGUSD			
<b>Totals</b>				
<b>Profit/Loss</b> income less expenses				

Advisor/Contact: \_\_\_\_\_ Date: \_\_\_\_\_

Site Controller Reviewed: \_\_\_\_\_ Date: \_\_\_\_\_

Activities Director Approval (ASB groups only): \_\_\_\_\_ Date: \_\_\_\_\_

Principal Approval: \_\_\_\_\_ Date: \_\_\_\_\_