



# High School Student Council Proposal Form

Event Name: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Date/Time of event: \_\_\_\_\_

Location: \_\_\_\_\_

Event Budget: \_\_\_\_\_

Chaperones: \_\_\_\_\_

Event Description: \_\_\_\_\_

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Purpose/Benefits: \_\_\_\_\_

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Purpose/Benefits: \_\_\_\_\_

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STU/CO Co-President

STU/CO Advisor

Headmaster

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