



ACTIVITY CALENDAR

Directions: Fill in the form below. Save the form and email the form as an attachment to your principal for approval and then to the Superintendent.

After approval from the Superintendent, this form will need to be sent to Lisa Kanak for posting.

Sponsor's Name _____ Date _____

Activity/Event _____

Date of Activity/Event _____

Class/Group/Organization Involved: _____

Location/Campus: _____

Starting Time: _____

Ending Time: _____

Additional information about the Activity/Event (ex. need ac/heat, room arrangement, need keys, etc.)

Principal Approval: Yes No

Principal _____

Superintendent Approval: Yes No

Superintendent _____

Entered on school website and district calendar _____ Initials _____