**KARNS CITY AREA SCHOOL DISTRICT**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School

REQUEST TO CLOSE A STUDENT ACTIVITY ACCOUNT

*Any Student Activity groups who will be 1) closing or, 2) whose major membership will be graduating, or 3) whose major membership will no longer be eligible to participate in future activities of the organization, must submit a "Request to Close a Student Activity" form. Failure to take any action regarding any unspent balance within one year of the inactivity of the account will deem those funds to be donated to the respective Student Council fund of the respective school.*

1. NAME OF ORGANIZATION:

2. REASON FOR CLOSING:

1. DISPOSITION OF FUNDS:

 Does this organization have any funds remaining? Yes\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_

 If yes, what is the estimated ending balance? $\_\_\_\_\_\_\_\_\_\_\_\_

 What disposition will be made of these funds? (Donation to another activity, purchase of equipment or other contribution to the district, etc.) All funds must be expended.

A copy of the entire Board Policy has been provided to all organizations to provide full understanding of the responsibilities of Student Activity groups formed in the District.

4. DATE OF CLOSING:

DATE SUBMITTED:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SUBMITTED BY:

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

Director of Business Affairs approval: