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| --- | --- |
| Date: |  |
| School Name: |  |
| Proposed Chapter Name: |  |

Note: Official chapter names must begin with the school name.

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| Briefly explain why you are interested in becoming a chapter of the Foundation: |

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| Does the school chapter have the support of parents, staff and if applicable PTO?: |

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| *Note: You must also complete the Annual Fundraising Plan Form.*  |

Please list the name, phone, email, and proposed title of each individual that will serve as a chapter officer:

|  |  |  |  |
| --- | --- | --- | --- |
| **Title**  | **Name** | **Email** | **Phone** |
| President |  |  |  |
| Vice President |  |  |  |
| Treasurer |  |  |  |
| Secretary |  |  |  |
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We have thoroughly reviewed and will abide by the Foundation’s Chapter Policies:

|  |  |  |  |
| --- | --- | --- | --- |
| Proposed President: |  | Date: |  |
| Proposed Vice President: |  | Date: |  |
| Proposed Treasurer: |  | Date: |  |

**Return this form to** **hernandezt@mapleton.us** **or to the Mapleton Education Foundation, 6951 Fox Way Denver, CO 80221**