# FALLON MIDDLE SCHOOL
# PARENT FACULTY CLUB (PFC)
## Application/Renewal for PFC Enrichment Program
## (Form A)

I. We, parents of Fallon Middle School, request permission to establish/renew an Enrichment Program for the 20_____ - 20_____ school year.

II. The **name of this program** will be _____

and will have as its **purpose** _____

_____

III. The **number of students** this program aims to serve is _____

IV. If there are more students who want to take part than the program can accommodate, the selection criteria will be

_____

V. We have attached the **budget** (Form B) for this program to this application.

**Respectfully Submitted by:**

_____ _____ _____
Parent (name and signature) Role/Position Date

_____
Name and grade of child/children in Fallon

_____ _____ _____
Parent (name and signature) Role/Position Date

_____
Name and grade of child/children in Fallon

**Approved by:**

PFC President _____ Date _____

PFC Enrichment Committee _____ Date _____

Recorded in FMS PFC Minutes on this date _____