

Fundraising Request Form

This form must be filled out for each fundraising event that is planned during the year.

School: _____ Date submitted: _____

Requesting organization: _____

Person in charge: _____

Dates of proposed activity: _____

Location of proposed activity: _____

Approximate number of students involved: _____

Approximate number of supervisors provided: _____

Nature of activity: (i.e., candy sale, book fair, etc.): _____

Purpose of activity: (How will the instructional program for all students be enhanced or the attitudes of students, parents, staff, and community be promoted?) _____

Approved by: _____ Date _____
 President

_____ Date _____
 Student Representative- ASB

_____ Date _____
 Principal

DISTRICT OFFICE USE ONLY

Please submit entire form to Business Office. Approval form will be returned to school.

Approved by: _____ Date _____
 Director of Financial Services

_____ Date _____
 Governing Board