

Request for Fundraiser Approval

School Site:	
Fiscal Year:	Date this form is completed:
Proposed event:	
Description of fundraiser:	
Requesting Club/Organization(s):	
Proposed Date(s) of Event:	
Club Contact Person:	
ASB or Club Advisor:	
Status of Event (check one): ☐ New Event	☐ Held Previously (Years):
Event Profit form completed? ☐ Yes ☐ No	(attached form if completed)
Approval	
(Submitted an	ad Approved by)
Student/Organization Representative:	
	(Signature, Title, and Date)
Club Advisor:	
	(Signature, Title, and Date)
Student Council Recommendation	\square No
Student Council Representative:	
•	(Signature, Title, and Date)
Principal/School Administrator or Designee	Recommendation: \square Yes \square No
Principal/School Administrator:	
	(Signature, Title, and Date)
Recorded in ASB Student Council Minutes	
	(Date)