

CHAMBERSBURG AREA SCHOOL DISTRICT
Request Form for the Contribution of Gifts, Grants, and Donations

Section 1:

Name: _____

Address: _____

Home Phone: _____ Work Phone: _____

Email address: _____

Organization: _____

Section 2:

Approximate value of gift as determined by the donor: \$ _____

Section 3:

Description of donation:

*(If the donation is **technology-related**, please complete Section 4 on page 2.)*

Signature of the Donor: _____

Please return completed form to the school office.

Office Use Only

Recommendation of appropriate school official: _____

Signature: _____**Technology Department Representative:** _____

Superintendent Acceptance: Yes No _____ **Date:** _____**Board Approval:** _____ **Date:** _____**Board Denial:** _____ **Date:** _____

Request Form for the Contribution of Gifts, Grants, and Donations (cont'd.)

Section 4:

HARDWARE:

Make/Model: _____	Processor: _____
Type of monitor: _____	Memory: _____
Other peripherals: _____	HD size: _____
Printer type: _____	CD-ROM: _____
Contact person: _____	Phone Number: _____

SOFTWARE:

We accept software, but we must follow some very precise guidelines.

We must receive the original disks, manuals and license. If you used the software as a qualifier for an upgrade, we cannot accept the earlier version. If you have made copies of the software that you intend to continue using, we cannot accept it. You must certify that you have destroyed any backup copies of the software. You must also certify that no copies of the software were installed on any other computer system where they might be used. We provide a letter of receipt that lists the items included in your donation.