Updated January 2024

Elizabethtown Areas School District

Donation Request Form

Thank you for supporting the Elizabethtown Area School District. To facilitate the donation process, kindly complete this *Donation Request Form* and submit it to the Board Secretary by email at becky_maxwell@etownschools.org or by mail at 600 East High Street, Elizabethtown, PA 17022. Per School Board Policy 702, monetary/non-monetary donations of $1,000 or less require administrative approval. In contrast, monetary/non-monetary donations greater than $1,000 require formal approval of the Board of School Directors by majority vote. Once approved at the administrative or school board level, monetary donations should be presented to the Board Secretary as checks payable to the Elizabethtown Area School District. Non-monetary donations require coordination of delivery arrangements with the Board Secretary. We appreciate your cooperation in this process, and if you need further assistance, please don't hesitate to contact the Board Secretary.

DONOR INFORMATION:

_____

Name of Donor *(if an organization, please include organization name and contact name)*

_____

Donor Mailing Address City State Zip Code

_____

Donor Telephone Number Donor Email Address

DONATION DETAILS:

Would you like to make a monetary donation to the Elizabethtown Area School District?

[ ] Yes [ ] No If Yes, monetary donation amount $_____

Would you like to make a non-monetary donation of Goods or Services to the Elizabethtown Area School District?

[ ] Yes [ ] No If Yes, estimated value of the non-monetary donation amount $_____

For non-monetary donations, please provide a detailed description of the donated Goods or Services, including, if applicable, the condition of the proposed donated item and any anticipated costs to the District as a result of the donation *(continue on back if needed)*:

_____

_____

Is there a specific program, school club/organization, or school with which your donation is designated?

[ ] Yes [ ] No If Yes, donor designation: _____

DONOR ACKNOWLEDGEMENT:

By signing below, I attest that all information provided in this *Donation Request Form* is true and accurate and I understand that the monetary/non-monetary donation will become the property of the Elizabethtown Area School District and will be under the jurisdiction of the District in accordance with School Board Policy and administrative rules and regulations.

_____

Donor Signature Date

********** **For District Use Only** **********

APPROVAL RECOMMENDATION:

[ ] Approval [ ] Disapproval

_____

Name [ ] Check if Superintendent Designee Title

_____

Signature Date