



BOARD APPROVAL RECEIVED
DATE: _____

BOARD APPROVAL NEEDED

APPLICATION FOR FUNDRAISING ACTIVITY

PART I: FUNDRAISER SPECIFICS

SCHOOL NAME: _____ SITE CODE: _____ DATE: _____

NAME OF FUNDRAISING ACTIVITY: _____

SCHEDULED DATES:

START: _____ SUB-ACCOUNT NAME: _____ PROJECT CODE: _____

END: _____ **** Food-related fundraisers may last a maximum of 14 consecutive days, and require the USDA Smart Snacks Form completed and attached to this application****

DESCRIPTION OF FUND RAISING ACTIVITY (ONE ACTIVITY PER APPLICATION)

****Please provide as much detail as possible about the Fundraising activity that will take place****

DESCRIPTION OF HOW RAISED REVENUE WILL BE UTILIZED (ALSO INCLUDE PRIZES/AWARDS/INCENTIVES)

****If listing supplies, events, prizes, awards and incentives, please provide specific examples****

SPONSOR'S NAME (PLEASE PRINT) SPONSOR'S SIGNATURE/DATE

PRINCIPAL'S NAME (PLEASE PRINT) PRINCIPAL'S SIGNATURE/DATE

PART II: REQUISITION

TYPE OF FUNDRAISER

CONSIGNMENT FUNDRAISER (FOR ITEMS THAT CAN BE RETURNED, A REQ TO ENCUMBER 10% OF THE COST MUST BE SUBMITTED WITH THIS APPLICATION TO THE DISTRICT ACTIVITY FUND CUSTODIAN AT THE ACCOUNTING DEPARTMENT FOR BOARD APPROVAL)

RQ #: _____

NON-CONSIGNMENT (REQ FOR FULL ENCUMBRANCE REQUIRED PRIOR TO THE ORDERING OF ANY GOODS OR SERVICES)

RQ #: _____

ACCOUNTING USE ONLY

Board Approval/Non-Approval Information

PART III: NET PROFIT

COMPLETE THIS SECTION WITHIN TWO WEEKS OF THE END OF THE FUNDRAISER AND SUBMIT TO THE DISTRICT ACTIVITY FUND CUSTODIAN AT THE ACCOUNTING DEPARTMENT

****Please attach the completed Fundraising RQ Checklist (for consignment fundraisers) and the Reconciliation Worksheet for Fundraiser Profit/Loss (optional) to this form****

Total Revenue Collected A

Total Expenditures B

Net Profit (Loss) A-B

SPONSOR'S SIGNATURE/DATE

SITE ACTIVITY FUND CUSTODIAN SIGNATURE/DATE