

**Chisago Lakes Schools
Organization Funding Request Form 511B**

In compliance with school district Policy 511, all employees are required to complete this form before soliciting gifts from any civic organizations.

STAFF MEMBER NAME: _____ **DATE:** _____

REPRESENTING: _____

REQUEST TO (Name of Civic Organization): _____

AMOUNT OF REQUEST (Detail how funds are to be used): _____

RECOMMENDATION:

Approved Disapproved _____ Date: _____
~~Principal/Activities Director//CE-Director~~
~~Supervisor~~

Approved Disapproved _____ Date: _____
~~Superintendent-Business Director~~

Reason (if disapproved): _____