



CENTRAL UNIFIED SCHOOL DISTRICT

5652 W. Gettysburg Avenue

Fresno, CA 93722

Phone: (559) 274-4700

Fax: (559) 271-8200

www.centralunified.org

BOARD OF TRUSTEES

Yesenia Z. Carrillo

Naindeep Singh Chann

Nabil Kherfan

Karla Kirk

Joshua Sellers

Jaspreet Sidhu

Harman Singh

SUPERINTENDENT

Mark E. Marshall, Ed.D.

SCHOOL CONNECTED ORGANIZATION / BOOSTER CLUB / PTA

NEW / RENEWAL APPLICATION PACKET CHECK-OFF LIST FOR SCHOOL YEAR 2026-2027

REQUIRED DOCUMENTS

- ☐ **Application for School Connected Organization/Booster Club/PTA** – Signed by the Site Administrator (second page).
- ☐ **Acknowledgment Form** – Completed and signed by **all officers**.
- ☐ **Hold Harmless Agreement Form** – Signed by the **President**.
- ☐ **Annual Budget** – FY 2026–2027.
- ☐ **Profit & Loss Statement** – FY 2026–2027.
- ☐ **Bank Statement & Reconciliation** – For the month ending **June 30** (example reconciliation attached as reference).
- ☐ **Certificate of Insurance** – Must list **Central Unified School District as Additional Insured** (example attached as reference).
- ☐ **Current Bylaws** – Verify current bylaws against those posted on the Central Unified website. If your organization's bylaws differ from those on the website, include a copy with the packet.
- ☐ **Seller's Permit** – If applicable (for example, organizations that resell clothing or other merchandise).
- ☐ **IRS Form 990 Filing Return** – Include the most recent filing.
- ☐ **IRS Form 8822-B (Change of Address or Responsible Party – Business)** – Mail the completed form to the IRS and include a copy in the packet.

Important Reminders

- **Applications are due no later than September 15, 2026.**
- **PTA organizations are required to submit all items listed above except Current Bylaws and Seller's Permit.**
- **All forms and documents must be typed. Handwritten forms will not be accepted.**

District Administration

Mark E. Marshall, Ed.D. - Superintendent

*Javan Childs, Ed.D., Assistant Superintendent - Human Resources & Labor Relations · Amer Iqbal, Assistant Superintendent - Chief Business Officer
Marilyn Lopez, Ed.D., Assistant Superintendent - Student and Family Services · Julia McLennan, Assistant Superintendent - Educational Services*

Central Unified School District

Application for School Connected/Booster Club

☐

New Application

☐

Renewal Application

(required each school year)

GENERAL INFORMATION

Name of Organization		School Site	
Mailing Address		School Year	
		Date Requested	

EXECUTIVE BOARD OFFICERS

	Name	Address	Phone	Email
President				
Vice President				
Secretary				
Treasurer				

PURPOSE (Describe the purpose of the organization)

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ANNUAL OBJECTIVES (List specific goals for the school year)

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FINANCIAL INFORMATION

Name of Bank		Account Number	
Address of Bank		Authorized Signers	
Tax ID #(EIN)			

REQUIRED DOCUMENTS (Attach Copies - New {N} & Renewal {R}) - Excluding PTA's

☐ Bylaws {N}	☐ Profit & Loss Statement for Prior Yr. {R}	☐ 990 Filing Return - {R}
☐ Proof of Tax ID # {N}	☐ Proof of State Tax Exempt Status {N}	☐ Form 8822b {N, R}
☐ Acknowledgment Form signed by each officer {N,R}	☐ Seller's Permit If needed - {N,R}	☐
☐ Annual Budget {N, R}	☐ Bank Statement & Reconciliation {R}	☐
☐ Hold Harmless Agreement Signed by president {N,R}	☐ Certificate of Insurance w/Endorse {N,R}	
	☐ Proof of Crime/Fidelity Bond {N,R}	

REQUIRED DOCUMENTS -PTA's (Attach copies)

☐ Annual Budget	☐ Certificate of Insurance	☐ Insurance Endorsement Page
☐ Insurance Declaration Page	☐ Hold Harmless Agreement	☐ Acknowledgement Form signed by each Officer
☐ Prior Year Profit and Loss Statement		

FINAL APPROVAL

This certifies you have satisfied all sections of the Central Unified School District Application for School Connected/Booster organization.

Authorization are granted per school year. You must resubmit your application annually by September 15 to continue to operate as a School Connected/Booster organization.

Signature of School Site Administrator: _____

Date: _____

Signature of Chief Business Officer: _____

Board Approval: _____

Authorized Date: From _____ To _____

** You are not authorized to operate as a school connected/booster until Board Approval and signature for final approval is received from the school site administrator.*

CENTRAL UNIFIED SCHOOL DISTRICT

School Year _____

School Connected/Booster Club Manual Acknowledgement Form

As an elected officer to a School Connected/Booster club operating within the Central Unified School District, I certify that I have read the Central Unified School District School Connected/Booster Club Manual. I understand the procedures outlined in this manual and will adhere to its instruction. At any time should I have questions regarding policies or procedures, or the information outlined in this manual, I will contact the school site administration for clarification or further instruction. I further understand that the information provided in this manual is not intended to be specific or all-inclusive. It is the responsibility of the School Connected/Booster club to fully understand all laws that govern the operation of School Connected/Booster clubs.

Where necessary, the School Connected/Booster club will seek competent professional financial and tax advice for accounting and filing requirements. The District assumes no accountability or liability for the operation and management of School Connected/Booster clubs. I understand that as an officer of the School Connected/Booster club, and member of the executive board, I am required to ensure the School Connected/Booster club procedures and operating practices are financially and legally sound, and in conformance with all rules, regulations, laws, ordinances and statutes applicable to the organization. I further understand and accept that I am legally obligated to be prudent and reasonable in conducting myself to help preserve and protect the organization.

Signature: _____ **Date:** _____

Printed Name: _____

School Connected/Booster Club Name: _____

Office Held: _____

Maintain a copy of this manual for your reference.

Please return this signed receipt form to the school site administrator.

CENTRAL UNIFIED SCHOOL DISTRICT

School Year _____

School Connected/Booster Club Hold Harmless Agreement

School Connected/Booster clubs and its officers or operators will agree to indemnify, defend, and hold harmless the Central Unified School District, its Board Members, officers, agents, teachers, staff or any other employees from any damage injury or harm involving any student, parent or third party arising from or which occurs in any way as a result of or related to School Connected/Booster Club activity regardless of location, including every claim or demand made, every liability, loss, damage, or expense, of any nature whatsoever by any student, parent or third party which may be incurred by reason of:

Death or bodily injury to persons, loss of or injury to property, or any loss, damage or expense which may have been sustained by the School Connected/Booster Club or its representatives or participants, including any corporations, district employees, firm or corporation employed by the School Connected/Booster Club which arises from negligence or misconduct on the part of the School Connected/Booster Club, its representatives, students or participants, or which in any way is related to School Connected/Booster Club activity, regardless of date, time or location.

Any injury to or death of persons or damage to property, any loss or theft sustained by persons, firms or corporations, including the applicant participating in School Connected/Booster Club activity or conduct related to School Connected/Booster Club activity, or otherwise arising from any act of neglect, default, omission, negligence or willful misconduct of the Applicant, its members, or any person, firm or corporation employed by the Applicant, either directly or by independent contract, and attributable in connection with the activity covered by this agreement, on or off District property and during or outside of school hours.

School Connected/Booster clubs, at their own expense, cost and risk, shall defend any and all actions, suits or other proceedings that may be brought or instituted against the District, its Board, officers, agents, or employees and shall pay or satisfy any such claim, demand, liability or judgment rendered against the District, its Board, officers, agents, or employees in any action, suit or other proceedings arising out of the School Connected/Booster activities.

ACKNOWLEDGED BY SCHOOL CONNECTED/BOOSTER CLUB PRESIDENT:

Signature: _____

Printed Name: _____

Date: _____

ANNUAL BUDGET

EXAMPLE

School Connected Organization: _____

School Year: 2026/2027

** Complete the shaded areas only*

Estimated Revenues

Fundraisers.....

(list potential fundraiser and estimated revenue)

1		
2		
3		
4		
5	\$	-

Miscellaneous.....

(list all other potential revenue)

1		
2		
3		
4		
5	\$	-

Estimated Expenditures.....

1		
2		
3		
4		
5		
6		
7		
8		
9	\$	-
10	\$	-

Total Profit (Loss)..... \$

President Signature _____

Date: _____

Tresurer Signature _____

Date: _____

Board Approval date: _____

EXAMPLE

XYZ Company Bank Reconciliation Statement

March 31, 2024

Cash Balance Per Bank Statement	\$17,500
Add: Deposit in Transit	\$2,300
Less: Outstanding Checks	
No. 122	\$2,000
No. 123	\$1,000
Bank Error	\$500
	<u>\$3,500</u>
Adjusted Cash Balance	<u>\$16,300</u>
Cash Balance Per Cash Books	\$19,000
Add: Electronic Receipts From Customers	
Jane Doe	\$200
John Doe	\$250
Interest Earned	\$150
	<u>\$600</u>
Less: Returned (NSF) Check	\$2,500
Bank Service Fees	\$200
Cash in Transit Service Fees	\$100
Outstanding Checks	\$500
	<u>\$3,300</u>
Adjusted Cash Balance	<u>\$16,300</u>

EXAMPLE

Profit and Loss Statement
School Year : 2026-2027

Site: _____

Club/Activity: _____

Month: _____

Sales Revenue:

Week Ending:	\$0.00
Week Ending:	\$0.00
Week Ending:	\$0.00
Week Ending:	\$0.00
Week Ending:	\$0.00

Total Monthly Revenue	<u>\$0.00</u>
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Expenditures: (list each purchase for the month)

\$0.00
\$0.00
\$0.00
\$0.00
\$0.00

Total Monthly Expenditures	<u>\$0.00</u>
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Monthly Gross Profit/Loss	<u>\$0.00</u>
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Beginning Balance:	\$0.00
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(prior months Gross Profit/(Loss))

Gross Profit/(Loss)	<u><u>\$0.00</u></u>
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Report Prepared by: _____
(Signature)

Date: _____

Student Council/Club: _____
(Signature)

Date: _____

Student Council/Club: _____
(Signature)

Date: _____

Site Administrator: _____
(Signature)

Date: _____

Change of Address or Responsible Party — Business

► Please type or print.

► See instructions on back. ► Do not attach this form to your return.
► Go to www.irs.gov/Form8822B for the latest information.

OMB No. 1545-1163

Before you begin: If you are also changing your home address, use Form 8822 to report that change.

If you are a tax-exempt organization (see instructions), check here ☐

Check **all** boxes this change affects.

- 1 ☐ Employment, excise, income, and other business returns (Forms 720, 940, 941, 990, 1041, 1065, 1120, etc.)
- 2 ☐ Employee plan returns (Forms 5500, 5500-EZ, etc.)
- 3 ☐ Business location

4a Business name	4b Employer identification number
-------------------------	--

5 Old mailing address (no., street, room or suite no., city or town, state, and ZIP code). If a P.O. box, see instructions. If foreign address, also complete spaces below, see instructions.

Foreign country name	Foreign province/county	Foreign postal code
----------------------	-------------------------	---------------------

6 New mailing address (no., street, room or suite no., city or town, state, and ZIP code). If a P.O. box, see instructions. If foreign address, also complete spaces below, see instructions.

Foreign country name	Foreign province/county	Foreign postal code
----------------------	-------------------------	---------------------

7 New business location (no., street, room or suite no., city or town, state, and ZIP code). If a foreign address, also complete spaces below, see instructions.

Foreign country name	Foreign province/county	Foreign postal code
----------------------	-------------------------	---------------------

8 New responsible party's name

9 New responsible party's SSN, ITIN, or EIN. (CAUTION: YOU MUST REFER TO THE INSTRUCTIONS FOR FORM SS-4 TO SEE WHO MAY USE AN EIN.)

10 Signature. Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, it is true, correct, and complete.

Daytime telephone number of person to contact (optional) ►

Sign Here

Signature of owner, officer, or representative	Date
Title	

Where To File

Send this form to the address shown here that applies to you.

IF your old business address was in . . .	THEN use this address . . .
Connecticut, Delaware, District of Columbia, Georgia, Illinois, Indiana, Kentucky, Maine, Maryland, Massachusetts, Michigan, New Hampshire, New Jersey, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, South Carolina, Tennessee, Vermont, Virginia, West Virginia, Wisconsin	Internal Revenue Service Kansas City, MO 64999
Alabama, Alaska, Arizona, Arkansas, California, Colorado, Florida, Hawaii, Idaho, Iowa, Kansas, Louisiana, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, Washington, Wyoming, any place outside the United States	Internal Revenue Service Ogden, UT 84201-0023

Future Developments

Information about any future developments affecting Form 8822-B (such as legislation enacted after we release it) will be posted at www.irs.gov/Form8822B.

Purpose of Form

Use Form 8822-B to notify the Internal Revenue Service if you changed your business mailing address, your business location, or the identity of your responsible party. Also, any entities that change their address or identity of their responsible party must file Form 8822-B, whether or not they are engaged in a trade or business. If you are a representative signing for the taxpayer, attach to Form 8822-B a copy of your power of attorney. Generally, it takes 4 to 6 weeks to process your address or responsible party change.

Changing both home and business addresses? Use Form 8822 to change your home address.

Tax-Exempt Organizations

Check the box if you are a tax-exempt organization. See Pub. 557, Tax-Exempt Status for Your Organization, for details.

Addresses

Be sure to include any apartment, room, or suite number in the space provided.

P.O. Box

Enter your box number instead of your street address only if your post office does not deliver mail to your street address.

Foreign Address

Follow the country's practice for entering the postal code. Please do not abbreviate the country name.

"In Care of" Address

If you receive your mail in care of a third party (such as an accountant or attorney), enter "C/O" followed by the third party's name and street address or P.O. box.

Responsible Party

Any entity with an EIN is required to report a change in its "responsible party" on lines 8 and 9 within 60 days of the change. See Regulations section 301.6109-1(d)(2)(ii). See Form SS-4, Application for Employer Identification Number, and its instructions, for guidance about who can be a "responsible party" for line 8 and which identification number to enter for line 9.

Signature

An officer, owner, general partner or LLC member manager, plan administrator, fiduciary, or an authorized representative must sign. An officer is the president, vice president, treasurer, chief accounting officer, etc.



If you are a representative signing on behalf of the taxpayer, you must attach to Form 8822-B a copy of your power of attorney. To do this, you can use Form 2848. The Internal Revenue Service will not complete an address or responsible party change from an "unauthorized" third party.

Privacy Act and Paperwork Reduction Act Notice.

We ask for the information on this form to carry out the Internal Revenue laws of the United States. Our legal right to ask for information is Internal Revenue Code sections 6001 and 6011, which require you to file a statement with us for any tax for which you are liable. Section 6109 requires that you provide your identifying number on what you file. This is so we know who you are, and can process your form and other papers.

Generally, tax returns and return information are confidential, as required by section 6103. However, we may give the information to the Department of Justice and to other federal agencies, as provided by law. We may give it to cities,

states, the District of Columbia, and U.S. commonwealths or possessions to carry out their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

If you are an entity with an EIN and your responsible party has changed, use of this form is mandatory. Otherwise, use of this form is voluntary. You will not be subject to penalties for failure to file this form. However, if you fail to provide the IRS with your current mailing address or the identity of your responsible party, you may not receive a notice of deficiency or a notice of demand for tax. Despite the failure to receive such notices, penalties and interest will continue to accrue on any tax deficiencies.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated average time is 18 minutes.

Comments. You can send us comments from www.irs.gov/FormComments. Or you can write to the Internal Revenue Service, Tax Forms and Publications Division, 1111 Constitution Ave. NW, IR-6526, Washington, DC 20224. **Don't send the form to this office.**



ASSOCIATION INSURANCE MANAGEMENT INC

EXAMPLE

MEMBER CERTIFICATE OF INSURANCE

9/15/23

Thank you for purchasing your insurance from AIM. This is your Member Certificate and should be kept with your permanent records.

Insured #: CA207359

NAMED INSURED MEMBER:

~~Central Unified School District~~
~~4718 N. Polk Avenue~~
~~Fresno, CA 93722~~
~~5652 W. Gettysburg Ave~~
~~Fresno, CA 93722~~

Named Insured & Mailing Address

Education Support Purchasing Group
c/o AIM
P.O. Box 674051
Dallas TX, 75267-4051

PRODUCER NAME

AIM Association Insurance
Management, Inc.
PO Box 674051
Dallas TX, 75267-4051

Company / Coverage	Policy #	Effective Dates	Deductible	Limits of Insurance	
Concert Specialty Insurance Company / Commercial General Liability	GL2023AIM14497	9/15/23 - 9/15/24	\$ 0	Each Occurrence	\$1,000,000
				General Aggregate	\$2,000,000
				Products - COMP/OPS	\$2,000,000
				Personal & Advertising Injury	\$1,000,000
				Damage To Rented Premises	\$50,000
Concert Specialty Insurance Company / Extended Medical Payments	GL2023AIM14497	9/15/23 - 9/15/24	\$ 0	Medical payments-any one person	\$5,000
Concert Specialty Insurance Company / Fidelity Bond (Crime)	CR2023AIM11023	9/15/23 - 9/15/24	\$ 250	Each Occurrence	\$10,000

Central Unified School District is added as an Additional Insured to the General liability policy only.

Certificate Holder:

Central Unified School District
4718 N. Polk Avenue
Fresno, CA 93722
5652 W. Gettysburg Ave

This member certificate, together with the common policy conditions, coverage part(s), coverage form(s), and endorsements, if any, complete the above numbered policy. Copies of the Master Policies are available upon request or may be printed at www.aim-companies.com

AUTHORIZED REPRESENTATIVE

E.B. Allen

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):

Central Unified School District
5652 W. Gettysburg
Fresno, CA 93722

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable limits of insurance;

whichever is less.

This endorsement shall not increase the applicable limits of insurance.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**PRIMARY AND NONCONTRIBUTORY –
OTHER INSURANCE CONDITION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
LIQUOR LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

The following is added to the **Other Insurance Condition** and supersedes any provision to the contrary:

Primary And Noncontributory Insurance

This insurance is primary to and will not seek contribution from any other insurance available to an additional insured under your policy provided that:

- (1) The additional insured is a Named Insured under such other insurance; and

- (2) You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

SCHEDULE WAIVER OF SUBROGATION ENDORSEMENT

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

With respect to coverage provided under this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

SCHEDULE

Name Of Person(s) Or Organization(s):

Central Unified School District
5652 W. Gettysburg
Fresno, CA 93722

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Paragraph 8. Transfer Of Rights Of Recovery Against Other To Us of Section IV - Conditions is replaced by the following:

8. Transfer Of Rights Of Recovery Against Other To Us And Blanket Waiver Of Subrogation

- a. If the insured has rights to recover all part of any payment we have made under this Coverage, those rights are transferred to us. The insured must do nothing after the loss to impair those rights. At our request, the insured will bring "suit" or transfer those rights to us and help us enforce them.
- b. If required by a written "insured contract" executed prior to the "occurrence" or offence, we waive any right of recovery we may have against the person(s) or organization(s) shown in the Schedule above, because of payments we make for injury or damage arising out of your operations or "your work" for that person or organization. This endorsement applies only to the person(s) or organization(s) shown in the Schedule above.

All other terms, definitions, conditions and exclusions of this policy remain unchanged.

COMMUNITY RELATIONS

School-Connected Organizations

The Governing Board recognizes that parents/guardians and community members may wish to organize parent organizations and/or booster clubs for the purpose of supporting the District's educational and extracurricular programs. The Board appreciates the contributions made by such organizations toward the Board's vision for student learning and for providing all District students with high-quality educational opportunities.

Persons proposing to establish a school-connected organization shall submit a request to the Board for authorization to operate within the District or at a District school. Annual approval is required by the Governing Board to operate within the district or at a district school.

A school-connected organization, including a booster club, parent-teacher association or organization, or other organization that does not include an associated student body or other student organization, shall be established and maintained as a separate entity from the school or District. Each school-connected organization shall be subject to its own bylaws and operational procedures or to the rules or bylaws of its affiliated state or national organization, as applicable.

In addition, activities by school-connected organizations shall be conducted in accordance with law, Board policies, administrative regulations, and any rules of the sponsoring school.

The Superintendent or designee shall establish appropriate rules for the relationship between school-connected organizations and the District.

A school-connected organization shall obtain the written approval of the Superintendent or designee prior to soliciting funds upon the representation that the funds will be used wholly or in part for the benefit of a District school or the students at that school. (Education Code 51521)

A school-connected organization may consult with the principal to determine school needs and priorities.

Any participation in fundraising activities by students and their parents/guardians and/or any donation of funds or property shall be voluntary. (Education Code 49011)

Policy adopted: 2/26/02

Policy revised: 9/8/09; 9/13/16; 8/28/18, 9/23/25

COMMUNITY RELATIONS

School-Connected Organizations

A school-connected organization's request for authorization to operate within the district or at a district school shall contain, as appropriate:

1. The name and purpose of the organization
2. The date of application
3. Bylaws, rules, and procedures under which the organization will operate, including procedures for maintaining the organization's finances, membership qualifications, if any, and an agreement that the group will not engage in unlawful discrimination

cf. 0410 - Nondiscrimination in District Programs and Activities)

4. The names, addresses, and phone numbers of all officers
5. A list of specific objectives
6. An agreement to grant the district the right to audit the group's financial records, either by district personnel or a certified public accountant, whenever any concern is raised regarding the use of the funds
7. The name of the bank where the organization's account will be located and the names of those authorized to withdraw funds
8. The signature of the principal of the supporting school
9. Planned use for any money remaining at the end of the year if the organization is not continued or authorized to continue in the future
10. An agreement to provide evidence of liability and/or directors and officers insurance when and in the manner required by law

(cf. 1330 - Use of School Facilities)

Requests for subsequent authorization shall be annually submitted to the Superintendent or designee, along with a financial statement showing all income and expenditures from fundraisers by September 15. Failure to submit annual paperwork, by the deadline date, will result in non-reauthorization. Requests for reauthorization will be submitted to the Governing Board by October 30 for approval. If the Superintendent or designee proposes to deny the request for reauthorization, he/she shall present his/her recommendation to the Governing Board for approval.

When deemed necessary by the Board or the Superintendent or designee, the authorization for a school-connected organization to conduct activities in the district may be revoked at any time.

Each school-connected organization shall abide by the following rules:

1. The organization shall not act as an agent of the district or school.
2. The organization shall not use the district's tax-exempt status and identification number. It shall be responsible for its own tax status, accounting, internal controls, financial reporting, retention of records, and other operations.
3. The organization shall use a separate name and logo. Any use of a name or logo affiliated with the district, a district school, or a school team shall require the prior consent of the Superintendent or designee.
4. Funds of the school-connected organization shall not be co-mingled with district funds, including associated student body funds.
5. The organization shall not hire or directly pay any district employee. If a school-connected organization wishes to pay for additional and/or extracurricular services, the person to provide the services shall be hired through the district's personnel department, provided the Board approves the position. At their discretion, employees may volunteer to perform activities for school-connected organizations during nonworking hours.

(cf. 4127/4227/4327 - Temporary Athletic Team Coaches)

Regulation approved: 2/02

Regulation revised: 9/8/09; 8/1/12; 8/15/16; 8/28/18