Attachment "School-Connected Organization Annual Application"

Saratoga Union School District
20___ - ___ School-Connected Organization Annual Application

☐ **New** ☐ **Renewal** ☐ **Change to Executive Board Officers**

I. GENERAL INFORMATION

Name of Organization _____ **School Site** _____

Mailing Address _____ **School-Connected Organization Web Address** _____

II. EXECUTIVE OFFICERS INFORMATION

Title	Officer Name	Mailing Address	Phone Number	Email Address	End of Term

III. PURPOSE (Describe the Purpose of the Organization)

IV. ANNUAL OBJECTIVES (List Specific Goals for the School Year)

V. FINANCIAL INFORMATION

Name of Banking Institution **Authorized Bank Signer**

Bank Address **Authorized Bank Signer**

Bank Address Continued **Authorized Bank Signer**

Tax Identification Number (EIN) **Authorized Bank Signer**

VI. LIST OF REQUIRED DOCUMENTS

- ☐ Articles of Incorporation Bylaws
- ☐ Proposed Fundraising Events Form
- ☐ Proof of Tax Identification Number
- ☐ 501 (c)(3) Federal Determination Letter
- ☐ Certificate of Insurance
- ☐ Additional Insured Endorsement
- ☐ Hold Harmless Agreement Form
- ☐ Manual and District Policies Acknowledgment Form

VI. APPROVAL

This certifies you have satisfied all sections of the Saratoga Union School District application process for the 2026-27 school year and are authorized to operate through the authorized period as stated below.

Authorized Period: From _____ To _____

School Site Principal Name **Signature** **Date**

Chief Business Officer Name **Signature** **Date**

Saratoga Union School District

20___ - ___ School-Connected Organization Annual Application

VII. DENIAL OF APPLICATION

The Saratoga Union School District hereby denies the application submitted.

School Site Principal Name	Signature	Date
Chief Business Officer Name	**Signature**	**Date**

Reason for Denial