**FUNDRAISING REQUEST FORM**

Completed requests for the 2017-18 school year are to be submitted to the Business Manager, according to the following schedule:

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| **Request Due to DAC** | **Board Meeting Month** | **Activity Start Date** |
| 1st Day of School | September | Day After Meeting |
| Last Day Before Thanksgiving | December | Day After Meeting |
| Last Day Before Spring Break | April | Day After Meeting |

Important Note: A Fundraising Project Summary is due 6 weeks after the activity ends. Proceeds should be spent during the year the funds were raised. All groups are required to submit a request for each activity to the Business Manager specifying how all fundraising proceeds are to be spent.

School Building: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Group Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ District Account: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Description of Activity** |
| **All information must be provided in order to be approved.** |
| **Fundraising Activity** |   |   |   |   |   |
| **Activity Date(s)** |   |   |   |   |   |
| **Estimated Proceeds** |   |   |   |   |   |
| **Purpose and Use of Funds (MUST BE SPECIFIC)** |   |   |   |   |
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| **I am approving that this request is necessary to provide funds for the purpose described above.** |
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| **Building Principal/Activity Director Signature** |  |  |  |  |