



## FUND RAISING APPLICATION

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SPONSORING ORGANIZATION/GROUP \_\_\_\_\_

REPRESENTING WHICH SCHOOL PROGRAM \_\_\_\_\_

PERSON RESPONSIBLE FOR PROJECT: NAME \_\_\_\_\_

ADDRESS, CITY AND ZIP CODE \_\_\_\_\_

TELEPHONE \_\_\_\_\_

### TYPE OF FUND RAISER

**PRODUCT SALE** \_\_\_\_\_ **DANCE / SOCIAL ACTIVITY / OTHER**

DURING THE SCHOOL DAY (NO CANDY) \_\_\_\_\_ **PLEASE EXPLAIN ABOVE** \_\_\_\_\_

OUTSIDE SCHOOL DAY \_\_\_\_\_

ESTIMATED QUANTITY \_\_\_\_\_

COST FROM VENDOR \_\_\_\_\_

SELLING COST \_\_\_\_\_

ESTIMATED PERCENT PROFIT \_\_\_\_\_

VENDOR \_\_\_\_\_

SCHOOL FACILITIES REQUIRED \_\_\_\_\_

PROJECT START/ENDING DATE AND TIMES \_\_\_\_\_

DO YOU NEED A CASH BOX? \_\_\_\_\_

DID YOUR GROUP SPONSOR THIS ACTIVITY LAST YEAR? \_\_\_\_\_

LIST ANY GIFTS OR INCENTIVE PROGRAMS FOR THE SCHOOL, ORGANIZATION, ADVISOR OR INDIVIDUAL STUDENTS \_\_\_\_\_

WHAT WILL THE PROFITS BE USED FOR? (BE SPECIFIC) \_\_\_\_\_

APPROVED YES \_\_\_\_\_ NO \_\_\_\_\_ PRINCIPAL \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED YES \_\_\_\_\_ NO \_\_\_\_\_ BUSINESS MANAGER \_\_\_\_\_ DATE \_\_\_\_\_

REASON FOR DISAPPROVAL \_\_\_\_\_

Facility use form must be filled out if appropriate.