

FUND-RAISING REQUEST FORM FOR STUDENT GROUPS

Name of Project _____ Date(s) of Event _____

Purpose of Fund-Raising

Describe Fund-Raising Activities (include individuals/organizations involved, type of activity, etc.)

Will the fund-raising activities be restricted to the college community? Yes No
If No, has the Executive Director of the Foundation given his/her approval? Yes No

Indicate how funds will be collected and accounted for (Note that funds should be deposited with Campus Activities, Association, etc., within 48 hours).

If expenses will be incurred, how will any losses be covered?

Additional comments

Signatures Below Indicate Approval

Individual Completing Form/Position

Date

Faculty Advisor (if appropriate)

Date

Director of Campus Activities,
Theater, or Athletics

Date

Dean of Student Services/Executive Dean (if required)

Date

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- White - Individual
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