

REQUEST FOR APPROVAL OF A FUND-RAISING ACTIVITY

Organization _____

Campus _____

Project _____

Vendor _____

Vendor's address _____

Name of vendor's representative _____

Date of project _____

Length of project _____

Expected profit _____

Intended use of funds generated _____

Scope of solicitations _____

Sponsor's signature

Principal's signature

Date

Date

Superintendent's signature

COMMENTS:

Date

Approved

Denied