

<b>IRON COUNTY SCHOOL DISTRICT</b> Policy Handbook	ICSD Code: _____	IGDF-E
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**FUND RAISING REQUEST FORM**

1. Name of organization: \_\_\_\_\_

2. Request made by: \_\_\_\_\_ Position: \_\_\_\_\_

Advisors approval: \_\_\_\_\_

3. Describe fund raising activity (**door to door solicitation is prohibited**): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Purpose or need: \_\_\_\_\_

5. Name/Address/Phone of any outside concerns with whom you are dealing:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

6. Area of population to be approached: \_\_\_\_\_

7. Means of obtaining funds: (i.e. boosters, etc.): \_\_\_\_\_

8. Those (general) who would be involved and how: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. Dates of activity (from when to when, or at what activity): \_\_\_\_\_

<b>SCHOOL</b>
Approved: _____ Not approved _____
Principal's Signature: _____

<b>DISTRICT OFFICE</b>
Approved - District Official's Signature: _____
If not approved, reason: _____
_____
Copy returned to school (date): _____