

Once approved, a copy of this form must be maintained and available during fundraiser.



FUNDRAISING REQUEST FORM

(For Fundraisers by Student, Departmental, Employee Organizations and/or Entities)

Date

Host Sponsor (Name of Your Department, Division or Organization)

Host Sponsor's Primary Contact Name/Title:

Phone: Email:

Sponsoring Campus/Site:

Purpose and Description of the Fundraiser:

Date(s) of Fundraiser:

Location of Fundraiser (If off-campus include name of location, address and contacts):

Vendors to Be Solicited:

REQUESTED: _____
Signature of Host Sponsor Date

FUNDRAISER APPROVED: _____
Signature of Campus Executive Dean Date

Copies to Host Sponsor; Office of Institutional Advancement

----- **For Office of Institutional Advancement Use** -----

Received by Office of Institutional Advancement: _____ (Initials/Date)

Name/Contact of Actual Vendors Solicited (regardless of amount collected or if no contribution):

Amount Raised: _____ Initials/Date: _____