

**DHS Clubs and Activities
Fundraising & Goods Collection
Request for Approval - Part 1 of 2**



All proposals to fundraise or collect goods must be submitted for approval to Ms. Mullane in the Main Office at least two weeks in advance.

DHS Organization: _____

Student Leader(s): _____

Faculty Advisor(s): _____ **PHYSICAL SIGNATURE REQUIRED**

Faculty member supervising/holding funds collected: _____

Name of Fundraiser or Goods Collection Event: _____

Date, location, and time of the event (all event hours, including the time needed for set-up and take-down):

Number of attendees expected (for events, not drives): _____

NOTE: If the proposed event location is off-campus, the club advisor must submit the F1 Field Trip form and have participants complete health forms.

Intended use of funds and fundraising amount goal: \$ _____

Intended beneficiary organization (Name, Address, Phone # & email), if applicable:

NOTE: The club must obtain a Form W-9 from the organization and submit a check disbursement form signed by faculty advisor in order for donation to be processed.

Source of Funds:

- ☐ gift/donation
- ☐ sale of services (specify): _____
- ☐ sale of goods (specify): _____

If goods are collected, where donations will be received and stored until delivered to charity?

CALENDAR APPROVAL

Are the proposed dates and location available? Check with Mrs. Farren in the Main Office:

_____ (signature required)

FUNDS APPROVAL

Student Leaders and Faculty Advisor must discuss with Mrs. Blatney:

- ☐ how funds/goods are being collected (collection and storage of cash)
- ☐ use of My School Bucks system for sale of goods
- ☐ when Part 2 of this form must be submitted: _____

Mrs. Blatney: _____ (signature required)

ADMINISTRATIVE APPROVAL

Administration approval. Ms. Mullane:

_____ (signature required) date _____

**DHS Clubs and Activities
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Request for Approval - Part 2 of 2**



DHS Organization: _____

Student Leader(s): _____

Faculty Advisor(s): _____

Name of Fundraiser or Goods Collection Event: _____

Fundraising Results

Amount raised: \$ _____

Fundraising goal: \$ _____

Surplus amount: \$ _____

Planned use of surplus funds raised:

(Money raised should normally be used during the current school year; surplus funds raised are subject to transfer to the General Student Activity Fund to be used for the benefit of the District's student athletics and extra-curricular activities)

Advisor's signature: _____

To be completed by Main Office:

Primary Activity Fund Location: _____

Primary Activity Fund Sub-account: _____

Amount Deposited: _____

Bursar approval:

_____ (signature required) date _____