

Date Rec'd Building Office: _____

Date Rec'd Central Office: _____

Rec'd by: _____

Rec'd by: _____

MILAN COMMUNITY SCHOOLS

FUNDRAISING REQUEST

All fundraisers require school board approval. This form must be submitted one week prior to the board meeting.

Teacher(s)/Sponsor(s) : _____

Class/Group: _____ Date Submitted: _____

Number of Students: _____ Date(s) of fundraiser: _____

Length of Fundraising Activity: _____

Name of Fundraising Company: _____

Describe in detail the fundraising activity: (attach brochure, if available)

Anticipated Profit: _____

Benefit for School/Students: _____

Approved / Disapproved: _____
Principal Date

Approved / Disapproved: _____
Athletic Director (if applicable) Date

Approved / Disapproved: _____
Superintendent Date

Approved / Disapproved: _____
School Board Date