

# Jourdanton ISD Fund Raiser Application Form

Conducting a fundraiser on Jourdanton ISD property requires approval by the campus principal and the superintendent for the fundraisers and for the dates selected for the fundraisers. Fundraisers will be scheduled in the order that they are received.

**NO MORE THAN TWO JISD FUND RAISERS INVOLVING THE COMMUNITY WILL BE ALLOWED AT A TIME ON THE SCHOOL CALENDAR. BOOSTER CLUB FUND RAISERS THAT REQUIRE STUDENTS TO SELL ITEMS ARE INCLUDED.**

*Do not commit to or begin a fundraiser until approval has been received.*

Organization \_\_\_\_\_ Date of Request \_\_\_\_\_

Campus \_\_\_\_\_ Dates Requested for Fund Raiser \_\_\_\_\_

District Staff Member Responsible for Funds \_\_\_\_\_

Type of fund raiser (sale of ..., dance, carnival) \_\_\_\_\_

Name of Company \_\_\_\_\_ Profit Margin \_\_\_\_\_ Anticipated Profit \_\_\_\_\_

Mark the appropriate box below to indicate which population will be solicited for funds

- Campus students only
- Campus staff and students
- District Students
- District Staff and Students
- Community

For what purpose will the funds be used? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature of Sponsor

\_\_\_\_\_  
Date

This fundraiser has been reviewed and approved by the campus principal.

This fundraiser has been reviewed and DENIED by the campus principal.

\_\_\_\_\_  
Signature of Principal

\_\_\_\_\_  
Date

The date for this fundraiser has been reviewed and approved by the superintendent.

The date for this fundraiser has been reviewed and DENIED by the superintendent.

\_\_\_\_\_  
Signature of Superintendent

\_\_\_\_\_  
Date

After the fundraiser is complete, fill in the blanks below and forward a copy to Superintendent.

Funds Collected: \_\_\_\_\_ Profit: \_\_\_\_\_ Initialed by Sponsor: \_\_\_\_\_

Copy with all signatures to: \_\_\_\_\_ Sponsor \_\_\_\_\_ Campus Principal \_\_\_\_\_ Superintendent