

PLAINFIELD PUBLIC SCHOOLS
 SCHOOL REQUEST FOR APPROVAL OF
FUND RAISING ACTIVITY

PART I

SCHOOL _____ DATE _____

REQUEST SUBMITTED BY _____

TYPE OF FUND RAISING ACTIVITY _____

OUTSIDE PARTICIPANTS	PERIOD OF ACTIVITY	TO

PURPOSE OF FUND RAISING ACTIVITY _____

OUTSIDE PARTICIPANTS SIGNATURE _____ DATE _____

Approval by: Principal	Approval by: Chief of Staff

.....

**FUND RAISING ACTIVITY FOLLOW-UP REPORT
 (TO BE SUBMITTED TO SUPERINTENDENT)**

PART II

SCHOOL _____ DATE _____

REPORT SUBMITTED BY _____ TITLE _____

TYPE OF FUND RAISING ACTIVITY _____

DATE FINISHED	TOTAL RECEIPTS	TOTAL EXPENSES	TOTAL PROFIT

PRINICIPAL'S SIGNATURE _____ DATE _____

DIRECTIONS: COMPLETE THE UPPER PORTION (PART I) OF THE REQUEST FORM AND SUBMIT TWO COPIES TO THE CHIEF OF STAFF.

*UPON COMPLETION OF THE FUND RAISING ACTIVITY, THE LOWER PORTION (PART II) OF THE FORM IS TO BE COMPLETED AND ONE COPY IS TO BE FORWARDED TO THE CHIEF OF STAFF

**PLAINFIELD PUBLIC SCHOOLS
FUND RAISING BUDGET**

DEFINITION OF NEED	PROPOSED	ACTUAL	
Activity of trip _____ _____ _____ _____	Cost Per Student <div style="border: 1px solid black; width: 100px; height: 40px; margin: 0 auto;"></div>	Number of Students <div style="border: 1px solid black; width: 100px; height: 40px; margin: 0 auto;"></div>	Total Need (A) <div style="border: 1px solid black; width: 100px; height: 40px; margin: 0 auto;"></div>

B. Revenue from Fund Raising \$ _____

Total Need Balance (A-B) \$ _____

C. Revenue From Fund Raising \$ _____

Cost

- a) Supplies/Vendor \$ _____
- b) Advertisement \$ _____
- c) Other \$ _____

Total costs a+b+c \$ _____

FUND RAISING PROFITS = (LINE 1-2) \$ _____

D. Amount of Fund Raising Profits

- a) Applied to Need \$ _____
- b) Balance \$ _____

USE OF BALANCE (only complete this section if there is a balance)

Approved _____
(Principal)

Date _____

Approved _____
(Superintendent)

Date _____