

TRUMAN STATE UNIVERSITY

PROGRAM FUND-RAISING ACTIVITY REQUEST FORM

revised 9/03

- Remember:*
1. Prior to organizing any type of fund-raising event, the Program Fund Raising Form must be completed by the Requestor Contact, the Department/Division Head, and the Business Office.
 2. At no time may a student accept gifts or prizes as a result of their participation in a fund-raiser.

Department/Division: _____

Contact: _____

Date of Project: From _____ To _____

Purpose: _____

Identify and describe any outside organizations that will be involved with your project: _____

Describe how cash receipts will be handled: _____

Project Fund Raising Level (less costs): _____

APPROVAL

Requestor: _____ Date _____

Department/Division Head _____ Date _____

Business Office _____ Date _____