

McKenzie Special Schools

School Support Organization Proposed Fundraising Activity Request

(Pursuant to section 49-2-604, TCA, to be submitted prior to scheduling any fundraising activity)

The undersigned submits this proposed fundraising activity for approval by the director of schools (or designee) and realize that, at a minimum, the following will be considered when approving or denying the request:

- Whether the proposed fundraising activity conflicts with fundraising activities of the school, or the school district and
- Whether the activity is consistent with the goals and mission of the school and/or the school district.

Organization: _____

Date(s) of Fundraising Activity/Event: _____

Proposed Fundraising Activity/Event: _____

The event/activity/fundraiser will be on MSSD property? Yes No

The event is scheduled to take place during school day? Yes No

Proposed use of the funds raised: _____

Check All That Apply:

All funds will be collected by SSO volunteers and deposited into the bank account of the SSO.

The SSO will receive a commission/donation/payment from the vendor used for this fundraiser.

The school will receive \$_____ or _____% of the proceeds directly from the School Support Organization after the event. (The SSO will provide a financial analysis report and a check to the school for the amount indicated above within 1 week of the event)

Requested By: _____
SSO Representative Signature/ Title & Date

Reviewed By: _____
School Principal/ Designee Signature & Date

Approved by Director/Designee

Date