REGIONAL SCHOOL DISTRICT 13

Short-Form Fundraising Approval Application

(Repeat / Previously Approved Fundraisers Only)
*Use only if this fundraiser was approved in prior years with no material changes.
Any changes require submission of the full application.

A. Basic Information

School: _____   **Fundraiser Name:** _____

Organization / Sponsor: _____

Prior Year(s) Approved: _____

Date(s): _____

Location: ☐ On-Campus ☐ Off-Campus

Adult Sponsor / Contact Number:_____

B. No-Change Confirmation

☐ Activity, purpose, and use of funds are unchanged from prior approval

☐ Sponsoring organization and adult oversight unchanged

Briefly note any changes (if none, write "N/A"):

C. Compliance Attestations

☐ Approved district partner on file   ☐ Educational purpose approved

☐ Supplements (does not replace) district budget

☐ No prohibited practices (gambling, door-to-door, mandatory participation, in-school solicitation, in-school food sales)

☐ Student safety, supervision, and data privacy requirements met

D. Financial Handling

☐ Student Activity Account

☐ PTO/501(c)(3) Account

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Check here to confirm:

☐ No personal accounts or personal Venmo used

☐ Transparency of Fee % - include percentage breakdown here that will go to the platform/fundraising site profit _____, anticipated fees ____, and student organization ____ (should equal 100%)

Estimated Net Proceeds: $_____

E. Food / Raffle (If Applicable)

☐ Food outside school day; adult pickup only; no storage

☐ Municipal permit attached for raffle/bazaar/50-50

☐ Age and ticketing rules acknowledged

F. Insurance & Risk

☐ Insurance requirements reviewed and satisfied (if applicable)

G. Post-Event Accountability

☐ Financial summary will be submitted

☐ Records retained for one year

☐ Non-compliance may affect future approvals

Sponsor Certification

I certify this fundraiser complies with all RSD 13 policies and matches prior approvals.

Sponsor Signature: _____   **Date:** _____

Principal Use Only

☐ *Approved*   ☐ *Not Approved*

Principal Signature: _____   *Date:* _____