FUNDRAISING ACTIVITIES
Request for Approval Form

A separate request form needs to be completed for each activity.
You will receive notification from the Office of Student Affairs no later than one week from the date submitted.

Submitted by: __________________________ Date: __________________________

Name of student organization: ____________________________________________

Description of fundraiser: ________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Reason for raising funds: _________________________________________________

________________________________________________________________________

Timeline of fundraiser: _________________________________________________

Any additional information: ______________________________________________

Estimate of amount needed to rise: _________________________________________

☐ Approved

☐ Not Approved: _________________________________________________________

__________________________  __________________________
Signature of SGA President    Date

__________________________  __________________________
Signature of Director of Student Affairs  Date