

University of the Ozarks

Request for Organization Fundraising Event

This form must be submitted at least fourteen (14) business days in advance of the fundraising event.

Campus group making request: _____

Person making this request: _____ Phone: _____ Email: _____

Name of group leader/adviser: _____ Phone: _____ Email: _____
(Must be University staff member)

- Date funds were requested from SGA: _____ Results of request: _____
- Date funds were requested from Divisional budget: _____
- Results of request: _____

Will donated funds require charitable receipts be provided to donors in accordance with law and IRS requirements?
Yes ___ No ___

Date of request: _____ Dates(s) of fundraising event: _____

Description of fundraiser: _____

Purpose of fundraiser: _____

How much money do you anticipate raising? (net) _____

If adequate funds are not raised with this event for the to meet the intended objective, how will other funds be obtained?

Does this event require resources that must be acquired? ___ If yes, list: _____

What is the strategy for acquiring these resources? _____

What is the designated location of the event, or where can the item(s) be purchased or donations made?

Who is responsible for appropriate handling of funds raised? _____

Who will benefit from the event and how will they benefit? _____

Signature of person making request: _____ Date: _____

Signature of group leader/advisor: _____ Date: _____

Approval for Student Organizations:

Date: _____ Dean of Residential & Campus Life

Date: _____ Advancement Office

Approval for other:

Date: _____ Senior Staff Member

Date: _____ Advancement O