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FUND-RAISING APPLICATION FORM

(This form is to be completed for each fund-raising activity being considered.)

BY: .....

1. Name of organization(s) making application Middle School Student Council

2. Person completing this form: Name Jamie Salzman

Address DCEMS

Phone No. 715-241-9700 ext 2239

3. How much money does your organization plan to raise with this fund-raising activity? \$8000?

4. How do you plan to raise the money? Magazine Sale

5. Can you ensure the administration that no direct solicitation of students/teachers at school will be used to raise this money?  Yes  No

6. Do you plan to use either the implied or actual name of a school district organization or the school district in general in raising money?  Yes  No  
If so, in what context? The funds will support student activities

7. Will your fund-raising activity include direct solicitation of businesses, service clubs, or other organizations in our community?  Yes  No  
If so, which ones? Possibly medical offices, businesses

8. Do you plan to advertise the activity in the newspaper, radio, or in other means? Yes  No   
If so, how? \_\_\_\_\_

9. Will alcoholic beverages be served or sold during the fund-raising activity? Yes  No

10. Where does your organization plan to deposit the money that is raised? SAF

11. What are the names of the school personnel with whom you plan to deal in making financial gifts to the school? Casey Nye, Jodi Devine, Jamie Salzman

12. During what period of time (days, weeks, months) do you plan to conduct this fund-raiser? September - May (Actual sale dates 9/20/11 - 10/4-11)

This Fund-Raising Application Form has been reviewed and approved by the following people:

9/12/11  
Date  
9/16/11  
Date  
\_\_\_\_\_  
Date

[Signature]  
Building Principal  
[Signature]  
Superintendent of Schools  
\_\_\_\_\_  
Board of Education

When a copy of this form has been returned to the person making the application, the fund-raising activity will be placed on the school calendar. Local businesses being solicited may request to see a copy of this approved form.

Exhibit Approved: 9-13-83  
Exhibit Revised: 10-28-97  
RWD:lk

BOARD OF EDUCATION  
D.C. Everest Area School District  
6300 Alderson Street  
Schofield, Wisconsin 54476