

**FRANCIS MARION UNIVERSITY
STUDENT ORGANIZATION
FUNDRAISING REQUEST**

THIS FORM MUST BE COMPLETED AND SUBMITTED AT LEAST 10 BUSINESS DAYS BEFORE THE EVENT TO THE OFFICE OF STUDENT LIFE, UC 205. IF THE EVENT IS TO BE HELD ON CAMPUS, PLEASE APPLY THIS INFORMATION TO THE DIGITAL SPACE REQUEST FORM.

Name of Organization: _____

Date of Fundraiser: _____ Type of Fundraiser: _____
(EX; car wash, bake sale, dance, etc.)

Fundraiser will be held: On-Campus or Off-Campus

Location of Fundraiser: _____

Purpose of Fundraiser: (Please specify how funds will be used. If the fundraiser is to support a scholarship fund, please list its proper name.)

Is this fundraiser for a charitable organization? YES or NO If yes, who is it for?: _____

The following signatures indicate knowledge of this event

Advisor of the Organization	Signature	Telephone #
President of the Organization	Signature	Telephone #
Individual Making Request	Signature	Telephone #

Email of Individual Making Request

The following signature must be obtained for final approval. You will be notified by email.

Approve Disapprove _____ _____
Office of Student Life Representative Date

A Fundraising Income Report must be completed and submitted to the Office of Student Life within 10 business days of the fundraising event. Failure to report income received may result in disapproval of future Fundraising Event Request.