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.

Revised 01/20