 Form JHA-1

**FUNDRAISER PROPOSAL AND APPROVAL**

This form should be used for evaluating Sale-of-Product or Sale-of-Service Fundraisers as identified in Administrative Rule JHA-R (Student Activities Fundraising) and completed by the school sponsor or school support organization. This form should also be completed when DonorsChoose.org requests are to be considered. This Form does not need to be completed for the following list of fundraisers:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| * Yearbook * Book Fairs * School Store * Newspaper | | * School Pictures * Recycling Activities * Vending Operations * Homecoming Dance | * Prom * Athletic Concessions * Drama Productions | | * Purchasing Cards/Commitment Card * Ticket Sales (e.g. athletic events, student concerts, drama productions, etc) | |
| School: |  | | |  | |
|  |  | | |  | |
| School Sponsor/School Support Organization in charge of fundraiser: | | | |  | |

|  |  |
| --- | --- |
| 1. | Describe the fundraiser activity and the designated purpose for the use of the profits earned: |

|  |  |  |
| --- | --- | --- |
| 2. | How will this fundraiser benefit the school, students, or staff? | |
| 3. | Fundraiser product or service: |  |

How will fundraising information be disseminated to students/parents/guardians?

|  |  |  |
| --- | --- | --- |
| Method of collecting fundraiser funds: | |  |
| Dates of collections: |  | |

1. Are these dates in conflict with any other fundraiser at the school? Yes  No

|  |  |
| --- | --- |
| If yes, what are the other fundraisers? |  |

1. Have details of the fundraiser been discussed with the school bookkeeper? Yes  No
2. Is the fundraiser in compliance with the Cobb County School District Administrative Rules EEE-R, JHA-R

and KJ-R? (Rules can be located at www.cobbk12.org) Yes  No

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **FUNDRAISER PROPOSAL** | | | | | |
|  | Fundraiser Sponsor’s Name/Position Title: |  | | |  |
|  |  | | Date: |  |  |
| Fundraiser Sponsor’s Signature | | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **FUNDRAISER APPROVAL** | | | | |
|  |  | Date: |  |  |
| Principal’s Signature (Signature stamps not allowed) | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **DONORSCHOOSE.ORG REVIEW** (ALL request forms must be reviewed by Accountability, Research & Grants prior to implementation.) | | | | |
|  |  | Date: |  |  |
| CCSD Grant Manager’s or  Accountability, Research, and Grants Assistant Superintendent’s Signature | | | | |

**This form must be maintained in the school’s financial records**