

School Fundraiser – Special Exemption Request

Name of School: _____

Name of Organization(s) Requesting Exemption: _____

Contact Name: _____ Phone: _____

Email: _____

Description of the requested fundraiser:

Date(s) of Fundraiser: _____

Items to be sold: _____

Location of Fundraiser: _____

Reason the funds are being raised: _____

I certify my fundraiser, if approved, will not operate anywhere on the school campus 30 minutes prior to until 30 minutes after the end of meal service.

I certify my fundraiser, if approved, will not exceed 3 school days in length.

I certify that my organization will maintain all required documents including food labels of products sold and receipts for my fundraiser. In addition, I will provide these documents to the school/district upon request.

Please complete this application and submit to:

You will be notified of the status of you request within _____ days.

Internal Use Only:

Approved _____ (date approved)

Denied: non-compliant other: _____

Signature of Approver: _____