

Request for External Support

This form is to be completed <u>prior to</u> engaging in any fundraising activity or request. Any employee, student, alumnus, or other person that requests monetary funds or donation of items on behalf of the college or Foundation must complete this form, secure appropriate approvals and file the form with the Foundation.

Program/Department/Student Club:	
Contact person:	Contact phone:
Type of fundraising activity (i.e. raffle, sale illegal without prior approved permit from t	es, etc note: raffles or other types of gambling activities are the state):
	nds (Fundraising may not be used directly or indirectly to raiso vities or activities that directly benefit the college)
Amount anticipated to raise: \$	Proposed date(s) of efforts:
Anticipated fundraising expenses (description	on and amount):
Source of payment for fundraising expenses Individual(s) or company name(s) to be soli	
Authorization	:: Date:
	Date:
President:	Date:
	Date:
1 0	Foundation. The Foundation will contact you regarding at. Please call 507-453-2663 with any questions.
	ny gifts of cash, securities, services and property if the value meets leting a Donation and Gifts Acceptance Form.**
☐ Request approved ☐ Request Comments:	approved with changes
Processed by Foundation: Initials	s Date