

Pomperaug Regional School District 15
Serving the Communities of Middlebury and Southbury, CT
Fundraiser Approval Form

School where fundraiser will occur: PHS RMS MMS LMES MES GES PES _____

Fundraising organization: _____

Fundraising contact person: _____

Phone: _____ E-mail: _____

Dates of fundraiser: FROM _____ / _____ / _____ TO _____ / _____ / _____
month day year month day year

1. **Type of fundraiser?** Check all that apply, see Regional School District 15 Policy No. 5131.7 for definitions:

- Sale of merchandise to or by students in school
- Sale of merchandise outside of school
- Provision of service for a free
- Solicitation of items for sale
- Student solicitation for funds
- Other: _____

2. **Describe the purpose of this fundraiser:**

3. **Where** will the fundraiser be conducted? (*Check all that apply*)

- On school premises Off school premises

4. Will the fundraiser sell any **food or beverage items**? Yes No

- If yes was answered, please fill out questions 5-10 on the back of this form.

For district use only

The fundraiser is (*check one*):

- Approved:
 Not approved (indicate reason):

Signature	<i>Building Principal</i>	Date
Signature	<i>Director of Finance and Operations</i>	Date
Signature	<i>Superintendent of Schools</i>	Date

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5. Do the food or beverage items meet the Connecticut Nutrition Standards?

- No
- Yes: How was compliance determined? **Note:** Commercial items must be listed on the CSDE's List of Acceptable Foods and Beverages webpage. Foods made from scratch must have a recipe with nutrient analysis and the completed CNS worksheet.

6. **When** will the fundraiser be conducted? (*Check all that apply*)

- During the school day (*indicate times*): _____
- After the school day (*indicate times*): _____
- On the weekend (*indicate times*): _____

7. **How** will the fundraiser be conducted? Explain the sales process, money collection process, and pick up procedures:

8. Will the fundraiser be conducted at the **location of an event that has been exempted by the board of education**?

- No
- Yes: *Describe event:* _____

9. **Who** will the fundraiser items be sold to? (*Check all that apply*)

- Students
- Parents and other adults
- School staff
- Other (*specify*): _____

10. List all food or beverage items sold, e.g., candy, cookie dough, cake, soda, etc. (*Attach additional pages if necessary*)

Manufacturer	Food or beverage

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The fundraiser is (*check one*):

- Approved:
- Not approved (indicate reason):

Signature	<i>Building Principal</i>	Date
Signature	<i>Director of Finance and Operations</i>	Date
Signature	<i>Superintendent of Schools</i>	Date