

# Cherokee County School District

## Online Fundraiser Approval

### Fundraiser Information

School: \_\_\_\_\_ Teacher/Grade: \_\_\_\_\_

Fundraiser Title: \_\_\_\_\_

Purpose : \_\_\_\_\_

A. What online source will be used to conduct this fundraiser?

\_\_\_\_\_

B. What days will this fundraiser be available for public contribution?

Start: \_\_\_\_\_ End: \_\_\_\_\_  
(mm/dd/yyyy) (mm/dd/yyyy)

Total Projected Contribution \$ \_\_\_\_\_ -

C. Has the Online Fundraising Agreement been completed? (circle one) Yes No

If no, please indicate date it will be completed: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

( )	Approved	Principal: _____
( )	Denied	Date: _____

( )	Approved	Technology or Maintenance (if required) _____
( )	Denied	Date: _____