## **Attachment 1 – Fundraising Request Form**



## University Advancement Fundraising Request Form

Name of Project		Amount to be Raised
Name, Phone, and E-mail of Requester		Dept/College/Org
Purpose for which funds will be used		Account #
Begin: End Dates of Campaign/Special Event	:	
Types of Solicitation. Attach sample lette	ers brochures etc. University Advancem	nent will review all materials.
☐ Visits ☐ Event	Telephone Electronic/Social Media	Direct Mail Other
Fundraising Costs. Are funds available to University Account(s)	support fundraising activities?  Foundation Account(s)	
Other Attach explanation, if necessary.		
Attachments. Include the following:  - Prospects: list (by name) of thos  - Solicitors: list (by name) of who v  - Samples of Solicitation Materials  Approval Routing (signatures indicate ap	will contact prospects	e noted)
Requester Name and Signature		Date
Unit Development Officer (if applicable) Name and Signature		Date
Chair/Director (if applicable) Name and Signature		Date
Dean/Vice President (if applicable) Name and Signature		Date
Provost (if applicable) Name and Signature		Date
Vice President for Advancement Name and Signature		Date
President (if applicable) Name and Signature		Date
Forward completed/signed form to Unive	ersity Advancement, Burgin Dossett Hall,	 Room 302, 9-4242

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Revised May XX, 2016