

Instructions to Applicant:

\_\_\_\_\_  
Applicant/Group Name

1. Complete this application. Please print or type. If necessary, please use additional sheets of paper.
2. Sign and date this application.
3. Deliver this application to site principal.
4. Application will be reviewed by the principal and submitted to the Superintendent for a recommendation to the Board of Education.
5. Applicant will be notified of the Board's decision by Superintendent.

(School District Use Only)

**Principal**

Supt.'s Signature

1. Principal received:  
\_\_\_\_\_

**Superintendent**

1. Superintendent received: \_\_\_\_\_

2. Principal recommends  
\_\_\_\_\_  
Does not recommend  
\_\_\_\_\_

**Board of Education**

1. Sanctioned \_\_\_\_\_  
Declined to Sanction  
\_\_\_\_\_

3. Rationale for not  
Recommending \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Supt. Recommends  
\_\_\_\_\_  
3. Rationale for not  
recommending \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Date of Board of  
Education meeting  
\_\_\_\_\_

4. Reviewed and  
submitted to  
Superintendent  
\_\_\_\_\_  
Date

4. Reviewed and  
submitted to Board of  
Education  
\_\_\_\_\_  
Date

5. \_\_\_\_\_  
Principal's Signature

5. \_\_\_\_\_

**APPLICATION FOR SANCTIONING**

This is a request for sanctioning by the Applicant Group to the Board of Education. If sanctioned, the funds collected by the Applicant Group are exempt from the statutory controls over school activity funds.

Name of applicant group: \_\_\_\_\_

Address for correspondence: \_\_\_\_\_

\_\_\_\_\_

Taxpayer I.D. No. (if applicable): \_\_\_\_\_

Representative from whom additional information may be obtained: \_\_\_\_\_

Representative's address: \_\_\_\_\_

\_\_\_\_\_

Representative's phone number: \_\_\_\_\_

Representative's e-mail if applicable: \_\_\_\_\_

Purpose and goals of applicant group: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe how the school district and its students will benefit if the applicant group is sanctioned: \_\_\_\_\_

\_\_\_\_\_

Has this group been sanctioned by the Board of Education before? \_\_\_\_\_

If yes, what year(s)? \_\_\_\_\_

**FINANCIAL REPORT**

(Must cover 12 month period or months in existence if new organization)

\_\_\_\_\_  
Program, Association or Organization Name

A. BEGINNING BALANCE as of \_\_\_\_\_ \$ \_\_\_\_\_ (A)

B. REVENUES

Fund Raisers:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total Fund Raisers \$ \_\_\_\_\_

Donations:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total Donations \$ \_\_\_\_\_

Others:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total Others \$ \_\_\_\_\_

**Total Revenues** \$ \_\_\_\_\_ (B)

C. TOTAL AVAILABLE (A+B) \$ \_\_\_\_\_ (C)

D. EXPENSES: (list expenditures, attach additional sheet if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Total Expenses**

\$ \_\_\_\_\_ (D)

E. REVENUE OVER/UNDER EXPENDITURE (C minus D) Ending Bal: \$ \_\_\_\_\_

Is your bank account collateralized to cover monies deposited during the year?

\_\_\_\_\_ Yes      \_\_\_\_\_ No

Amount of collateral on bank account: \$ \_\_\_\_\_

List of most recently elected officers:

| Name  | Office | Service Year |
|-------|--------|--------------|
| _____ | _____  | _____        |
| _____ | _____  | _____        |
| _____ | _____  | _____        |
| _____ | _____  | _____        |
| _____ | _____  | _____        |

Applicant certifies that it does not and will not discriminate with respect to its benefits, membership, programs, operation or organization on the basis of race, tender, age, religion, national origin or disability.

Applicant acknowledges that the Board of Education has the discretion to sanction or decline to sanction the applicant, and the decision of the Board of Education is final and non appealable. Applicant further acknowledges that (a) the Board of Education may, at any time, request the records maintained by the applicant, which records applicant will promptly make available, and (b) the Board of Education may, at any time it believes it is in the best interest of the School District to do so, withdraw sanctioning, and the decision of the Board of Education is final and non-appealable.

Applicant also acknowledges that, in order for the School District to consider whether to maintain the sanctioning action of applicant, applicant shall provide to the Board of Education, upon request, on a annual basis, by July 1 of each year or at the time an application is received a financial report as defined by the Board of Education regulations for applicant’s recently ended fiscal year.

I certify that the information provided on this application is true and correct to the best of my knowledge.

Submitted by: \_\_\_\_\_  
President's Name                      President's Signature                      Date

\_\_\_\_\_

Treasurer's Name                      Treasurer's Signature                      Date

Adopted: 09/06/11  
Revised: