

**WAXAHACHIE ISD
CROWD SOURCE FUNDING REQUEST & AGREEMENT**

Campus: _____ Date: _____

Name: _____ Ext: _____

Fundraising (Monetary Goal): _____

Fundraising Goal (Be Specific): _____

ALL TANGIBLE GOODS BOUGHT WITH FUNDS RECEIVED FROM THIS FUNDRAISING EFFORT ARE THE PROPERTY OF WAXAHACHIE ISD AND MUST BE ENTERED INTO INVENTORY AS PER DISTRICT POLICY.

GENERAL PROCESS

1. Submit completed form to the building principal for approval.
2. Only after approval, teacher may establish the project on a fundraising website.
3. Campus administrator will send a copy of the form to the Business Office.
4. All purchases of technology items **MUST** have approval from technology before the fundraising effort begins.
5. When the project goal is met, a check, less any fees, will be sent directly to the Business Office.
6. WISD will deposit funds received, provide tax receipts as needed, and will record the proceeds in the appropriate campus activity fund.
7. All purchases **MUST** be made from the corresponding expense accounts.
8. **ALL PURCHASES** will adhere to normal District purchasing guidelines:
 - Technology purchases must be able to be supported by the WISD technology department.
 - All purchases must be from an approved vendor.
 - All purchases will follow the regular purchase order process.
 - All purchases must be for classroom use.
9. The above guidelines apply to any gift cards received from on online fundraising effort.
10. Each site receives a varying fee from the money raised from donors.
11. Donor websites shall not be established by the district for personal benefit, the benefit of a staff member or any member of their family, the benefit of a student or any member of a student's family.
12. Copies of crowd sourcing request documents are to be kept by the building principal for three years.

I have read and understand the process for receiving funds from my crowd sourced fundraising project. I also understand that WISD reserves the right to terminate my use of all online fundraising if procedures are not followed.

Teacher Printed Name

Teacher Signature

Date

Principal Approval

Date

Technology Approval (if required)

Date

Business Office Approval

Date