

**NEUMANN UNIVERSITY
Campus Fundraising Registration Form**

Department/Division: _____

Name of Fundraiser: _____

Description/Reason/Purpose of fundraiser: _____

Contact Person Responsible for Fundraiser and Information:

Name: _____ **Phone Number:** _____

Preferred Email: _____

College Representative Responsible for Collection/Allocation of Funds:

Name: _____ **Extension:** _____

Requirements to be followed for Approval of Campus Fundraiser:

1. All campus fundraising (college-sponsored) activities must be registered with the Vice President for Institutional Advancement and University Relations and receive all signature approvals at least two weeks prior to the start of the fundraiser.
2. Signatures from advisor/director/dean and unit vice president must be obtained 3. Once completed the Office of Institutional Advancement and University Relations will notify the college contact above.

Funds (Profits/Revenue) Restricted Account Number: _____

Agency (Income/Expense) Account Number: _____

Proposed Fundraiser Time frame: _____ **Start Date:** _____ **End Date:** _____

Projected Goal: \$ _____

Less Costs/Expenses: \$ _____

Net Profit: \$ _____

Budgeted Line Item: Yes _____ No _____

(Please attach fundraising budget)

	Signature	Date	Comments
Submitted by			
Dean/Department Head/Advisor			
Unit Vice President			
Vice President for Institutional Advancement			

*Note: Attach all pertinent correspondence