|  |  |
| --- | --- |
|  |  |
| 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 letters, brochures, etc. University Advancement will review all materials.**

|  |  |  |
| --- | --- | --- |
| * Visits
 | * Telephone
 | * Direct Mail
 |
| * Event
 | * Electronic/Social Media
 | * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |

**Fundraising Costs. Are funds available to support fundraising activities?**

|  |  |
| --- | --- |
| * University Account(s)
 | * Foundation Account(s)
 |
| * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 | Attach explanation, if necessary. |

**Attachments.** Include the following:

* Prospects: list (by name) of those to be contacted
* Solicitors: list (by name) of who will contact prospects
* Samples of Solicitation Materials

***Approval Routing (signatures indicate approval is recommended, unless otherwise 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 University Advancement, 9-4242

Revised July 2019