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| **Form G****FUNDRAISING ACTIVITY REQUEST FROM ORGANIZATION** |
| **Faculty Adviser(s)** |
| Type of Fundraising Activity |
| Beginning Date of Fundraising Activity |
| Ending Date of Fundraising Activity |
| Purpose of Activity |
| ==================================================================================== |
| **FOR OFFICE USE ONLY:** |
| **Date Received**  |
| Approved Disapproved Date  |
| Signature  |
| Dean of Students |
| **Approved Disapproved Date**  |
| Signature  |
| President |
| Revised August 2015 |