



**Eastern New Mexico University System  
Organizational Fundraising Project Approval Form  
Policy Reference: AGP&P 70-4**

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**SECTION 1: ORGANIZATION INFORMATION**

Organization Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Advisor/Sponsor Name: \_\_\_\_\_

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**SECTION 2: FUNDRAISING ACTIVITY DETAILS**

Fundraiser Name: \_\_\_\_\_

Type of Activity: \_\_\_\_\_

Purpose of Fundraising:

\_\_\_\_\_

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Location: \_\_\_\_\_

Date(s): \_\_\_\_\_ Time(s): \_\_\_\_\_

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**SECTION 3: PLANNING & COMPLIANCE**

Have you conducted fundraisers this academic year?

Yes    No

If yes, how many? \_\_\_\_\_

Areas involved (check all that apply):

Food Service

- Housing
- Public Safety
- Other: \_\_\_\_\_

Compliance Description:

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#### **SECTION 4: FINANCIAL INFORMATION**

Estimated Revenue: \$ \_\_\_\_\_

Estimated Expenses: \$ \_\_\_\_\_

Will financial commitments be made before approval?

Yes  No

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#### **SECTION 5: ACKNOWLEDGMENT**

I confirm this request complies with ENMU Policy 70-4 and is submitted at least one week in advance.

Sponsor/Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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#### **SECTION 6: APPROVALS**

Accountant/ Business Office: \_\_\_\_\_ Date: \_\_\_\_\_

AVP Student Engagement: \_\_\_\_\_ Date: \_\_\_\_\_

Vice President of Academic and Student Affairs:  Approved  Denied

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments:

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#### **OFFICE USE ONLY**

Date Submitted: \_\_\_\_\_

Date Reviewed: \_\_\_\_\_

Status: \_\_\_\_\_

Processed By: \_\_\_\_\_