



FUNDRAISING AUTHORIZATION REQUEST

This form must be completed if the organization has a goal of \$500 or more (either in one lump sum or from a variety of vendors).

Name of Program/Event:
Purpose and Goals of the Program/Event:
Audience for the Program/Event:
Benefit of Program/Event to UTSA:

Solicitation Plans: (i.e. mailings, personal calls, visits, etc.) Please attach copies of all solicitation materials for review and approval by the Development Office.

Prospect List: Please attach copies of all prospects for review and approval by the Development Office.

Logistics:

- To whom are checks made payable?
- To what person, office and address should contributions be sent?
- Into what account will funds be deposited? (funds must be deposited into a University account)
- How will funds be used for the program/event?
- How will the gift be acknowledged?
- What is the timeline for the solicitation process from start to finish?

Name of Organization:
Contact Person’s Title/Position in the Organization, Address, Telephone Number and E-mail:
Faculty Advisor’s Address, Telephone Number and E-mail:

Approvals:

Organization’s Authorized Representative

Organization’s Faculty/Staff Advisor

Associate Director of Student Activities

Executive Director of Development

OFFICE USE ONLY	
Applicant is an authorized representative of the student organization?	yes no
Organization is registered this semester.	yes no
Organization ___ has ___ has not applied for or received Leaderfund support for this program.	
Student Organization EIN:	_____
Date:	_____ Staff Member Conducting Verification: _____