WAYLAND UNION SCHOOLS

Crowdfunding Request Form
Application for Funds

1. Project Name:
   _____

2. Group Name:
   _____

3. Staff member in charge of Group/fundraiser: _____

4. Contact number: _____ Email : _____

5. Position: _____ Building: _____

6. Signature of Supervisor who is informed and approves of this request:
   _____

7. How many students and/or whom will this affect: _____

8. Amount to be raised (provide detailed budget on next page): _____

9. Amount of total project: _____

10. Are there District funds that will be committed/matched: _____

11. Has Technology Department been notified of any Technology purchases?

    Yes ☐   No ☐

12. Crowdfunding site chosen:

    a. RevTrak (fees 3.49%)
    b. GoFundMe (fees 7.9%)
    c. Piggybackr (fees 5% plus credit card fees 2.75%-3%)
    d. Amazon

ALL Applications must be sent by interoffice mail or email to: The Director of Finance and Operations with Fundraiser paperwork.

13. Provide a Description of how you want to use your crowdfunding **(please limit description to one page):**

Item & Source	Quantity	Price

Total Requested_____

[ ] Approved   [ ] Denied -- Reason:_____

Signature of Assistant Superintendent of Finance and Operations:

_____Date:_____

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