



Fundraising Proposal Form

Fundraising Proposal Form

(Submit to the Foundation at least 30 days before planned activity)

A. Requestor Information

- Department/Program/Organization: _____
- Primary Contact Name: _____
- Phone: _____ Email: _____

B. Fundraising Activity Details

- Name of Fundraising Activity: _____
- Purpose: _____
- Fundraising Goal (\$): _____
- Proposed Date(s): _____
- Location: _____

C. Type of Fundraising Activity (check all that apply):

Event Direct Mail Online Campaign Product Sales Other: _____

D. Target Audience

Alumni Community Members Faculty/Staff Students Corporations

E. Use of Funds

Describe how the funds will be used: _____

F. Budget Overview

Estimated Fundraising Revenue: \$ _____

Estimated Fundraising Expenses: \$ _____

Net Proceeds: \$ _____

G. Marketing & Publicity

List methods of promotion (e.g., flyers, press release, social media):



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H. Approval Signatures

Program/Department Leadership:

Name: _____

Title: _____

Date: _____

Foundation Representative:

Name: _____

Title: _____

Date: _____