

Public Relations

President (for fundraising only)

Bevill State Community College Request to Conduct an Extracurricular and/or Fundraising Activity For Non-Intercollegiate Athletics

Please ch	neck the appro	opriate request type: \Box	Extracurricular	Activity Fundraising Activity	tivity
Group:		Purpos	r:		
(1	undraiser:	•	to be completed and g	given to Director of Student Services b	efore scheduled activity.)
		(i.e., local businesses, s	student body, st	aff, community agencies, et	cc.)
Activity D	ate: From-	То-	Begin Time:	End Time:	
Campus:		Buil	ding:	Room:	
		mpus will be used for this fund anal material? Yes		evill State <i>Request for Facility Fori</i> use specify:	<i>m</i> must be completed.)
	•	•	•	ehicle ☐ Personal Car ☐ Other of Sheet must be completed and at	:tached.)
Signature of Requester			_	Date	
Director of Student Services ☐ Approved ☐ Disapproved (Reason)			 on)	Date	
			_		
Dean of S	Students ☐ Approved	☐ Disapproved (Reaso	on)	Date	
President (for fundraising purposes only) Approved Disapproved (Reason)			 on)	Date	
• F	Requester	ts will distribute a copy of t ent Services (Add to Camp	•	uest form to the following:	