

SCHOOL-CONNECTED ORGANIZATIONS

REQUEST FOR AUTHORIZATION AS A SCHOOL-CONNECTED ORGANIZATION

Request No. _____ For District Use Only
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SAN RAFAEL CITY SCHOOLS

Superintendent's Office – 310 Nova Albion Way, San Rafael, CA 94903

Telephone (415) 492-3233

Instructions: Persons proposing to establish or continue a school-connected organization must annually request authorization from the Board of Education by completing this form (E 1230) and submitting it to the Superintendent's Office at above-listed address. Please read this form carefully and ensure that all questions are answered in full and all required documentation is attached. Incomplete forms will not be considered. If additional space is needed respond to a question, please attach additional sheets. The completed form must be signed by an officer of the organization over the age of eighteen (18) **and** the principal of the supporting school.

1. Name of organization: _____
2. Date of request for authorization: _____
3. Please briefly describe the purpose of the organization, including the school(s) and program(s) the organization intends to support:

4. **Attach** a copy of the bylaws, rules, and procedures under which the organization will operate, including, but not limited to, procedures for maintaining the organization's finances and any membership guidelines/qualifications.

School-connected organizations shall not engage in unlawful discrimination. By submitting this request for authorization, the organization acknowledges and agrees that its membership requirements do not and will not discriminate on the basis of a protected category. **Initial:** _____

5. List the names, titles, addresses, and phone numbers of the organization's current officers:

Name: _____
 Title: _____
 Address: _____
 Telephone: _____

Name: _____
 Title: _____
 Address: _____
 Telephone: _____

Name: _____
 Title: _____
 Address: _____
 Telephone: _____

Name: _____
 Title: _____
 Address: _____
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6. State the organization’s specific goals/objectives:

7. For each fundraising activity or event that the organization plans to hold this school year, please provide: (a) description of any goods or services to be sold; (b) anticipated date and location; (c) target amount of funds to be raised; and (d) planned use of funds raised.

8. Identify the bank the organization will use: _____, and the names of each person that will be authorized to withdraw funds from the organization’s bank account(s): _____.

9. If this request for authorization is granted by the Board of Education, the organization will and hereby does automatically grant the District the right to audit the organization’s financial records at any time, either by District personnel or a certified public accountant. **Initial:** _____

10. Describe the organization’s plan for use of funds remaining at the end of the school year if the organization is not continued or authorized to continue.

11. **Attach** evidence of insurance coverage in the form of an **original** certificate of insurance for bodily injury and property damage liability coverage in the amount of at least One Million Dollars (\$1,000,000) combined single limit naming San Rafael City Schools and its Board of Education as additional insureds. Please see AR 1230 for complete insurance requirements, which are incorporated herein.

12. If the organization seeks to raise more than Twenty-Five Thousand Dollars (\$25,000), **attach** documentation of independent legal status (e.g., articles of incorporation).

13. If the organization has federal tax exempt status (e.g., IRS 510(c)(3)), **attach** copies of an IRS affirmation letter and most recent IRS form 990.

14. If the organization is required to register with the State Attorney General’s Registry of Charitable Trusts, **attach** proof of current registration.

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15. The undersigned is an officer of the organization, over the age of eighteen (18), with authority to submit this request for authorization and to bind the organization, and hereby certifies that he/she has read and understands, and that the organization agrees to and will abide by, all policies, regulations, terms, and conditions set forth in the current versions **Board Policy 1230** and **Administrative Regulation 1230**, which are available at online at <http://www.srcs.org/policies> and incorporated herein by this reference.

The undersigned further certifies that all information provided herein and attached hereto is true and correct to the best of his/her personal knowledge.

Signature: _____

Printed Name: _____

Title: _____

Date: _____

To be completed by the principal of the sponsoring school:

16. I, _____, am the principal of _____ School. I have reviewed this request for authorization in its entirety, and do not oppose authorization of this organization as a school-connected organization.

Signature: _____

Date: _____

To be completed if this is a subsequent request for authorization by an existing school-connected organization:

17. **Attach** both (i) a financial statement for the previous school year showing the funds raised and spent by the school-connected organization, and (ii) an explanation of the expenditures made by the school-connected organization and the purpose of each expenditure.