



DRIPPING SPRINGS INDEPENDENT SCHOOL DISTRICT DONATION ACCEPTANCE FORM

Donor Name:			
Donor Address:			
City, State:		Zip:	
Phone:			
Date Items/Cash Donated:			
Group/Campus Receiving Donation:		Sponsor/Teacher:	

Value of Donation:	Cash <input type="checkbox"/>	Goods <input type="checkbox"/>
<i>For donations of supplies/equipment, please give a description of the items donated. (Model number, serial number, brand, etc.)</i>		
Specify any DSISD services required to accept donation; including installation, construction, modifications:		

APPROVAL REQUIRED FOR ALL GIFTS

Per DSISD Board Policy CDC:

1. A potential donor wishing to donate to the District money, materials, services, or equipment shall seek prior approval of the proposed gift by submitting this form for consideration by the District.
2. Any gift that is given to a school or program of the District shall become the property of the District.
3. Any gift given without a specific use or designation may be allocated, at the discretion of the Superintendent or designee, for use by any school or program.

	Signature	Date	Approved	Denied
Principal/Director				
Learning & Innovation				
Business Services				