

Bevill State Community College

Request to conduct an Extracurricular and/or Fund Raising Activities for Non-Intercollegiate Athletics

Please check the appro	priate type request:	
ExtracurriculaFund Raising A	·	
Group		
Group(Student Club or Organiza	tion)	
Type of Extracurricula	r Activity	
Type of Fundraiser:		
Targeted group: (local but	usinesses, student body, staff, and	d community agencies)
Purpose for fundraiser		
Activity Date:	Begin Time:	End Time:
Campus/Location:		
·	campus will be used for this fu must be completed and attach	unction or activity a <i>Bevill State</i> ned)
	uired, indicate the mode of t Personal Car	<u> </u>
	for this function or activity a <i>B</i>	Bevill State Vehicle Trip Sheet must
Requestor		
Date		
******	*******	*********
Approved	Disapproved (reason)	
Director of Student Ser	rvices Date	
(Director should add to Ca		

Director of Student Services will distribute a copy of the completed request form to the following:

- Requestor
- Dean of Students