

**FOOD BASED FUNDRAISER APPROVAL FORM 2017-18**

Please complete form below, print, and obtain necessary signatures. After completion, scan signed document and send to Food and Nutrition Services Dietitian at [christina.chisler@jeffco.k12.co.us](mailto:christina.chisler@jeffco.k12.co.us) four (4) weeks prior to the exempt fundraiser. Contact Christina Chisler at the Student Nutrition Center at 303-982-6761 with questions.

**School Name:** \_\_\_\_\_ **School Group Name:** \_\_\_\_\_  
**Sponsor Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_  
**Sponsor Email Address:** \_\_\_\_\_ **Name of Fundraiser:** \_\_\_\_\_

**1. What food item(s) will be sold?**

*Please attach nutrition facts label and ingredient list to email for each food item being sold.*

**2. Where will fundraiser take place?**

**3. What date(s) will fundraiser be held?**

**4. What time will fundraiser be conducted? Include beginning and end time.**

_____	_____
<b>Advisor/Sponsor</b>	<b>Date</b>
_____	_____
<b>Principal Signature</b>	<b>Date</b>
_____	_____
<b>Food and Nutrition Dietitian Signature</b>	<b>Date</b>

**Approved**       **Denied**