UNIVERSITY OF THE VIRGIN ISLANDS
INSTITUTIONAL ADVANCEMENT
REQUEST TO FUNDRAISE FORM

All formal and informal fund-raising solicitations to foundations, businesses, individuals, or groups are processed for approval through the Office of Institutional Advancement.

Individual submitting request: ______________________ Date ______________

Campus organization, department, or program involved:_________________________________________________________

Contact #: _______________________ Email address:____________________________________________________________

Account/Fund code number where approved funds will be deposited: (account number) (fund code)____________________

Group(s) to be solicited:

Intended request amount: ________________ over_____ year(s). Estimated gift potential:__________________.

Matching company: _____________ Anticipated company match: ____________

Type(s) of solicitation: (i.e., direct mail, phone, face to face, other) Please attach a copy of the solicitation piece, if applicable.

Estimated total number of persons to be solicited: __________________

Solicitation campaign completion date: ______________________

Will goods or services be provided? ______________ (yes or no)

If yes, value: ___________________________________________

Brief project summary: (please provide as a separate one-page word document) ____________________________________________________________

Requester’s Signature: _____________________________________

Dean, Advisor or Provost’s Signature: __________________________

For IA Office use only

Permission to fundraise: approved/disapproved (circle one) by:

_______________________________________ (Director of Annual Giving and Alumni Affairs)
_______________________________________ (Director of Major Gifts)

Reason denied: ____________________________________________________________________________________

Copies sent to:

_____ Requester  _____ Accounting Office
_____ Budget Office  _____ Dir. of Advancement Svcs. & Schol.
_____ Dean, Advisor or Provost