

**Salt Lake City School District**  
**I – 17 Form B (See Policy and Administrative Procedures)**

Title: Student Fund Raising Activities  
Fund Raising Evaluation

Index: I = Instructional Policies

Today's Date \_\_\_\_\_

At the conclusion of your fund raising project, complete this fund raising evaluation form and submit it to the principal.

Name of participating organization \_\_\_\_\_

Teacher/Sponsor \_\_\_\_\_ Number of Participants \_\_\_\_\_

What was your projected profit? \$ \_\_\_\_\_ What was the outcome? \$ \_\_\_\_\_

Did you reach your goal(s) \_\_\_\_\_ yes \_\_\_\_\_ no \_\_\_\_\_ comments \_\_\_\_\_

How was the money used? \_\_\_\_\_

Will you utilize this fund raiser in the future? \_\_\_\_ Yes \_\_\_\_ no comments \_\_\_\_\_

Additional comments or suggestions regarding this fund raising project  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_