



KEAN UNIVERSITY

COMMUNITY SERVICE APPROVAL/VERIFICATION FORM

The Community Service Approval/Verification Form is to be submitted by the recognized Kean University student group or organization to the external agency or organization in which the collected items or funds will be donated to. The purpose of this form is to ensure that the recognized student group or organization has been authorized to solicit donations on behalf of the external agency or organizations. This form should be completed in full by the student group or organization prior to being submitted for approval by the external recipient agency or organization. Specifically, this form should be submitted with the name of the student group, a brief description of the fundraising/collection activity, the dates collections will be accepted, the date that the recipient organization should expect to receive the donated items or funds, and the contact information for the organization.

To Whom It May Concern:

A recognized student group or organization at Kean University, has requested to hold an event or activity that will raise funds or collect items with the use of your agency's or organization's name under the intention of donating the items or funds to your organization. Before we will permit the organization to collect funds or solicit items we require your organization's approval. Please review the information provided below by the recognized student group or organization to ensure that your organization is aware of and authorizes the student group to proceed.

Once you have reviewed the information, please indicate your approval and complete your contact information. Once this form is completed, please either fax it to the Kean University Center for Leadership and Service at 908-737-5175, scan and email it to serve@kean.edu, or mail it to the address provided below. If you have any questions, please feel free to contact us at 908-737-5170 or email serve@kean.edu.

Sincerely,

Susan Figueroa
Managing Assistant Director for Civic Engagement and Community Service
Center for Leadership and Service

STUDENT GROUP TO COMPLETE:

Date Submitted: _____

Name of Recognized Student Group: _____

Type of Activity: Fundraising Collection of Items: _____
Description of Items

Name of Recipient Organization: _____

Description of Activity: _____

Project Start Date: _____ End Date: _____ Anticipated Date of Donation: _____

RECIPIENT ORGANIZATION TO COMPLETE:

Recipient Org. Contact Name: _____ Title: _____

Date: _____ Phone: _____ Email: _____

- We authorize the above named student group to collect items and/or solicit donations on our behalf.
- We do not authorize the above named student group to collect items and/or solicit donations on our behalf.

Organization Representative Signature: _____

CENTER FOR LEADERSHIP AND SERVICE