## OTHER REVENUES GRANTS FROM PRIVATE SOURCES

CDC (EXHIBIT)

## LAKE TRAVIS INDEPENDENT SCHOOL DISTRICT APPLICATION FOR DONATION

Donor name:
Address:
Phone:
Name, address, and contact information of person authorized by the donor to act on behalf of the donor regarding the donation:
Name:
Address:
Home phone: Cell phone:
If the donation is made by an entity with a governing board, a letter from the entity authorizing consent to donate must be included in the application.
Description, value, and purpose of the donation:
Life of donation:
Provisions or restrictions placed on the donation:
Terms and conditions for return of the donation to the donor if the donation has any time or use limitations:

DATE ISSUED: 5/25/2017

LDU 2016.02 CDC(EXHIBIT)-X

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Itemization of matching or additional funds or other costs that may be incurred by the District during and subsequent to the donation period:					
Donor comments, instructions, and/or requests rega	rding the prop	osed	donatio	n:	
The signature of the donor indicates that he or she had pal and/or Superintendent's designee and has provide sponses to the prompts/questions.				-	•
Signature of donor (or authorized signature if entity has a governing box	Date ard)				
Signature of principal/director	Date				
Signature of facilities designee	Date				
Signature of technology designee	Date				
This section to be completed by the Superintend	lent or design	ee			
Does the donation create a program or condition that is inconsistent with District policies, philosophies, or current or future plans or purposes?			Yes		No
Does the donation create costs to the District that are unreasonable or unsupportable?			Yes		No
Does the donation create a restriction on any other school or District program that is inconsistent with District policies, philosophies, or current or future plans or purposes?			Yes		No
Does the donation create a conflict with public law?			Yes		No
Does this donation add a permanent and/or temporary structure to District property?			Yes		No

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Comments/Review of proposal (To be completed by Superintendent's design	gnee)
Final disposition:	
□ Approved	
□ Declined	
Superintendent/Designee	Date

DATE ISSUED: 5/25/2017

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