Attachment A

Sponsorship/Donation Approval Form

	oma public schools. I	n order to process your gift, please provide the below	ft will be used w information:
1. Name, Address & Ph	one Number of Donoi	:	
2. Description of the gi	ft/ donation: _		
3. Value of the gift/don	nation: (market value): \$	
4. What is your intende		· · · · · · · · · · · · · · · · · · ·	
4. What is your interior	ed purpose or use for		
	urrently seeking to es	tablish a contractual relationship with OSDE? If so, p	lease disclose
the nature of the contra	actual relationship:		
the nature of the contra	actual relationship:		
the nature of the contra	actual relationship:		
	actual relationship:		
DATE:	actual relationship:	(Signature and Title of Donor)	
DATE: OSDE Received application:	Date	(Signature and Title of Donor)	
	Date	(Signature and Title of Donor) INTERNAL OSDE USE ONLY	
DATE: OSDE Received application:	Date Ac	(Signature and Title of Donor) INTERNAL OSDE USE ONLY Excepted by the State Board of Education on	

OSDE Gift/Donation Policy-Effective Date: 7/24/2012

Oklahoma City, OK 73105