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OCT 08 2024



Donation (Cash / Property) to the Madison Public Schools

Completion of this form is required prior to the district's consideration of a proposed donation to the Madison Public Schools. This form is to be completed in its entirety and submitted to the building principal, assistant principal, Athletic Director, or Superintendent prior to receipt of any donated goods, services, or funds. The school principal may approve gifts to a school that are valued at \$500 to \$1,000 and meet criteria established by the administrative regulations established in accordance with this policy. Donations valued in excess of \$1,000 must be approved by the Board of Education. (Reference Policy #3281)

Date Form Completed: October 5, 2024

Organization / Individual Making Donation: Madison Foundation

Address: PO Box 446 Madison, CT 06443
(Street, city, zip)

Phone #: 203-245-2796

Description of Donation / Gift and intended use: support DHHS students attending a 3 day STEM conference

Approximate Value: \$3600

Recipient(s) name: The GAINS Club at Daniel Hand High School

Acknowledgements: (optional)

In honor/memory of: _____

Acknowledgement Contact: _____

Acknowledgement Address: _____

This request cannot be acted up on before the building Principal / Assistant Principal, Athletic Director, or Superintendent has been consulted concerning this gift. Please provide the name/signature of the person who was consulted.

Signature of Person Consulted: _____

Are there conditions of use attached to the gift/donation: ☒ Yes ☐ No

If yes, please explain conditions: completion of the "Grant Report Form" to describe how this grant helped us meet our objectives

Are there installation, site preparation, labor, or equipment costs needed for installation, etc.? ☐ Yes ☒ No
If yes, who is responsible for the costs? _____

What is the annual maintenance cost of the donation, if any? ☐ Yes ☒ No

Are there any other additional costs to the District? ☐ Yes ☒ No

(Signature of Donor) _____

For Central Office Use Only

Accepted by Superintendent: _____
Signature

10/11/24
Date

Accepted by Board of Education on: _____
Date