



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 \$,1000 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: 2-9-26

Organization / Individual Making Donation: Madison Cultural Arts, Inc.

Address: PO Box 67, Madison CT 06443
(Street, city, zip)

Phone #: 973-214-1789 (Jim Newton)

Description of Donation / Gift and intended use: Cash donation to provide aid to student(s)
so they may be able to access and fully participate in the arts offered by the Madison School System with a first preference to those with financial need.

Approximate Value: \$2500

Recipient(s) name: MPS

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: The schools will agree to report use of the funds
(amount expended, use and balance) to MCA annually.

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]
(Signature of Donor)

For Central Office Use Only

Accepted by Superintendent: [Signature]
Signature

2/10/24
Date

Accepted by Board of Education on: _____
Date