



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: April 29, 2026

Organization / Individual Making Donation: Polson PTO

Address: 302 Green Hill Road, Madison, CT 06443
(Street, city, zip)

Phone #: (203) 245-6480

Description of Donation / Gift and intended use: Donation toward the grade 8 Holiday Hill field trip

Approximate Value: \$2,000.00

Recipient(s) name: Polson Middle 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: Kathryn Hart

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

If yes, please explain conditions: _____

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

Kelly B. Hunt
(Signature of Donor)

For Central Office Use Only

Accepted by Superintendent: [Signature]
Signature

4/29/26
Date

Accepted by Board of Education on: _____
Date