



ARANSAS PASS INDEPENDENT SCHOOL DISTRICT DONATION ACCEPTANCE FORM

Donor Information	
Donor Name/Organization:	
Donor Address:	
Donor Phone Number:	

Donation Information	
Date Donated:	
Group/Campus Receiving Donation:	
Value of Donation:	Donation Type: Monetary <input type="checkbox"/> Equipment/materials <input type="checkbox"/>
For donations of equipment/materials, please provide a description of the items donated (including model number, serial number, brand, etc.).	
Intended use or purpose of donation (if applicable):	

Per APISD Board Policy CDC (Local) the Board delegates to the Superintendent the authority to accept unsolicited gifts on behalf of the District. However, any gift that the potential donor has expressly made conditional upon the District's use for a specified purpose, or any gift of real property, shall require Board approval. Any donation accepted by the district becomes the sole property of the district.

Signatures and Approval			
	Signature	Date	Approved/Denied
Principal/Director			
Superintendent			
Board of Trustees			