

Appendix D - Annual Authorization for School Connected Organizations to Fundraise

This packet is required every year from organizations in order to raise funds for Paramount schools.

Attachments: Please attach all information listed. The application is considered complete when all documents and attachments have been submitted.

Submission: The completed forms with attachments are due to the Business Services Department at the District Office no later than the third Friday of each September for the school year. Please keep a copy for your records. A signed copy will be returned to the organization once District approval has been obtained.

Assistance: For assistance in preparing the application, please contact Business Services at (562) 602-6025.

Facility Use Department: For assistance in submitting a facility use request, please contact Facilities at (562) 602-8088.

Name, Purpose, and Objectives of the Organization

Legal Name of the Organization: _____
School Site: _____ EIN #: _____ School Year: _____
Purpose of the Organization: _____ _____ _____
List Specific Objectives of Organization: _____ _____ _____
Application Type: [<input type="checkbox"/>] New Application [<input type="checkbox"/>] Renewal Application

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Bylaws, Rules, and Operational Documents

Adopted bylaws	<input type="checkbox"/> Attached to application
Bank used by Organization: Name: _____ Address: _____	
Organization EIN #: _____	
Names of individuals authorized to withdraw funds:	
First Name: _____ Last Name: _____ Position: _____ Phone #: _____ Email: _____	
First Name: _____ Last Name: _____ Position: _____ Phone #: _____ Email: _____	
First Name: _____ Last Name: _____ Position: _____ Phone #: _____ Email: _____	
Planned use for any money remaining if the Organization is not continued or authorized to continue in the future: _____	
Financial statements showing all income and expenditures, if any:	<input type="checkbox"/> Attached to application <input type="checkbox"/> Not applicable (include reason): <input type="checkbox"/> If there is a significant ending account balance, provide an explanation as to the reason for the savings and approval for such savings.
Evidence of liability insurance coverage:	Attach a Certificate of Insurance (COI) with the following evidence of coverage. <input type="checkbox"/> Commercial General Liability (\$1,000,000 /\$2,000,000) <input type="checkbox"/> Certificate Holder: Paramount Unified School District, 15110 California Avenue, Paramount, CA 90723 <input type="checkbox"/> Additional insured endorsement naming "The Paramount Unified School District, its board, officers, agents, employees, and volunteers" as additionally insured.
State Incorporation Status:	<input type="checkbox"/> California Certificate of Status attached to application. EIN: _____ <input type="checkbox"/> Not yet incorporated
Federal IRS 501(c)3 Status:	<input type="checkbox"/> Federal determination letter attached to the application. <input type="checkbox"/> Not yet filed

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Organization Officers | Leave blank if the position does not exist or is vacant

Name of Organization: _____ School Year: _____
School Site: _____ EIN #: _____
Officers Information
President Full Name: _____ Address: _____ Phone Number: _____ Email: _____
Vice President Full Name: _____ Address: _____ Phone Number: _____ Email: _____
Treasurer Full Name: _____ Address: _____ Phone Number: _____ Email: _____
Secretary Full Name: _____ Address: _____ Phone Number: _____ Email: _____

Non-Discrimination Statement

_____ ("Organization") will not engage in unlawful discrimination in its operations, activities, or membership practices. The Organization is committed to promoting equality and inclusivity and will adhere to all applicable laws and regulations regarding non-discrimination. We affirm that our bylaws, rules, and procedures expressly prohibit discrimination based on race, color, religion, sex, national origin, age, disability, genetic information, sexual orientation, gender identity, or any other characteristic protected by law. We understand the importance of fostering a diverse and inclusive environment and will take proactive measures to prevent discrimination and ensure equal opportunities for all individuals.

Statement Granting Right to Audit Financial Records

_____ (“Organization”) acknowledges and agrees to grant the Paramount Unified School District (“PUSD”) the right to audit the group's financial records, either by assigned district personnel or a certified public accountant, at any time. This includes, but is not limited to, audits related to financial discrepancies, compliance with financial regulations, or any other circumstances deemed necessary by the district.

General Acknowledgement

- The Organization has received, read, and understands the District’s “Guidelines for School Connected Organizations” handbook.
- The Organization acknowledges that it shall not act as an agent of the district or school. It shall operate independently and be responsible for its own actions and decisions.
- The Organization acknowledges that it shall not use the district's tax-exempt status and identification number. It shall be responsible for its own tax status, accounting, internal controls, financial reporting, retention of records, and other operations.
- The Organization acknowledges that it shall use a separate name and logo. Any use of a name or logo affiliated with the district, a district school, or a school team shall require the prior consent of the Superintendent or designee.
- The Organization acknowledges that funds of the school-connected Organization shall not be co-mingled with district funds, including associated student body funds. Proper accounting and financial management practices shall be followed at all times.
- The Organization acknowledges that it shall not hire or directly pay any district employee. If the Organization wishes to pay for additional and/or extracurricular services, the person to provide the services shall be hired through the district's personnel department, provided the Board approves the position. Employees may volunteer to perform activities for school-connected Organizations during non-working hours at their discretion.
- The Organization acknowledges that any fundraising activities initiated by the Organization shall be submitted to school administration for approval prior to the fundraising activity.

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Organization Signatures

As an officer of Organization, I hereby acknowledge that I have read and understand the policies outlined in this document. I certify that all information provided is true and accurate to the best of my knowledge. I understand that any false statements or misrepresentations may result in consequences as outlined by law and/or District policies. Further, I understand that the authorization for a school-connected Organization to conduct activities in the district may be revoked at any time by the Superintendent or designee.

Name of Organization: _____		School Year: _____	
School Site: _____		EIN #: _____	
Full Name: _____		Title: _____	
Signature: _____		Date: _____	
Full Name: _____		Title: _____	
Signature: _____		Date: _____	

School Signatures

As Principal of _____ ("School"), I hereby acknowledge that I have reviewed and recommend the below action to the District. I have read and understand the bylaws and BP/AR 1330, which serve as the rules, and procedures under which the Organization will operate. Further, I understand that the Organization is a separate entity from the school and district and is subject to its bylaws, operational procedures, and in accordance with law, Board Policies, Administrative Regulations, and any rules of the sponsoring school.

[] Approved [] Denied

Full Name: _____		Title: _____	
Signature: _____		Date: _____	

District Signatures

As Superintendent or designee, I hereby acknowledge that I have reviewed the Organization's application and recommend the action below to the Paramount Unified School District Board of Trustees. If approved, it is contingent upon the Organization's continued compliance with its own bylaws and applicable Board Policies, Administrative Regulations, and any rules of the sponsoring school. Approval may be revoked at any time in accordance with board policy. If denied, the Organization may resubmit within 30 days.

[] Approved [] Denied

Full Name: _____		Title: _____	
Signature: _____		Date: _____	

Appendix F – Fundraising Events

Please complete the information for each event that the Organization anticipates hosting this year. Please attach additional pages if needed.

Name of Organization: _____

School site: _____ EIN#: _____ School year: _____

Name of event	
Event description	
Event date	
Event times	
Event location	
Event contact person (name, title, email, and phone)	
Will District facilities be used? *If so, please make reservations via https://www.facilitron.com/pusd90723 .	
Approximate number of volunteers?	
Will food be served or sold?	
How will the organization pay for any fees necessary to hold the event?	
What is the anticipated use of any funds raised from the event?	
Will the event require permits, license, or other approvals? *If so, how will the organization apply for and obtain such approvals and who will be responsible?	

Site Administrator Approval: _____

Date: _____

District Approval: _____

Date: _____