

APPLICATION FOR SANCTIONING
Due Annually on July 5th

This is a request for sanctioning by the applicant to the Stillwater Board of Education, pursuant to which the funds collected by the applicant are exempt from the statutory controls over school activity funds. All fields are required.

Date Submitted: _____ Select One: Initial Application _____ Renewal _____

Name of Sanctioned Organization: _____

Official Mailing Address for the organization: _____

Organization's Taxpayer I.D. Number: _____

Organization President

Organization Treasurer

Name: _____

Name: _____

Phone: _____

Phone: _____

Email: _____

Email: _____

Organization's Purpose, Goals, and the Benefit to District Students: _____

Organizations's Website and/or Social Media Accounts: _____

(All funds raised by the organization will be used to achieve the stated purpose and goals of the organization. No administrative fees or stipends to officers or others will be permitted. Any payments to coaches or employees must be approved by and paid through Stillwater Public Schools.)

Applicant certifies that it does not and will not discriminate with respect to its benefits, membership, programs, operation, or organization on the basis of race, gender, age, religion, national origin, or disability.

Applicant acknowledges that the board of education has the discretion to sanction or decline the applicant, and the decision of the board of education is final and nonappealable. Applicant further acknowledges that (a) the board of education can, at any time, request the records maintained by the applicant, which the applicant will promptly make available, and (b) the board of education can, at any time it believes it is in the best interests of the school district to do so, withdraw sanctioning, and the decision of the board of education is final and nonappealable.

Applicant agrees that ny legal or audit expenses incurred by Stillwater Public Schools related to the sanctioned organization will be billed to and paid for by the sanctioned organization.

Applicant also acknowledges, that if requested by the board of education the organization will be required to submit financial and supporting documentation for an agreed upon procedure review to be performed by the school district's external auditor. This information must be submitted by the deadline established at the time of the request.

APPLICATION FOR SANCTIONING (Cont.)

Instructions for Completing Application:

1. Read policies CFBB and CFBB-P and complete this application: the cash flow statement for the prior school year, the cash flow statement estimate for the future school year and the independent audit review certification. If necessary, use additional sheets of paper.
2. Attach twelve (12) months of bank statements and a reconciliation to the unaudited cash flow statement (bank statement credits and debits should match the cash flow summary collections and expenditures respectively, and be reconciled to the ending balance).
3. Sign and date this application and have the school faculty sponsor review and sign (required).
4. Provide a copy of your organization's by-laws and/or constitution and a list of all officers.
5. Email or deliver the application and attachments to:

Chief Financial Officer
314 S. Lewis
Stillwater, OK 74074

6. Signing this form certifies that you agree to attend mandatory district training

Organization Representative/Office Name and Position (printed)

Signature

Date

School Faculty Sponsor / Athletic Coach Name (printed)

Signature

Date

APPLICATION FOR SANCTIONING (Cont.)

ORGANIZATION/ASSOCIATION
UNAUDITED CASH FLOW STATEMENT **FOR PRIOR SCHOOL YEAR (ACTUALS JULY 1 – JUNE 30)**

Name of Organization/Association: _____

FINANCIAL ACTIVITY FOR SCHOOL YEAR _____

Beginning Cash Balance, July 1, _____ \$ _____

Collections:

Fundraiser, Merchandise Sales, Etc. \$ _____

Donations \$ _____

Parent/Student Contributions \$ _____

Other (list): _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Collections \$ _____

Expenditures:

Fundraising Expenses \$ _____

Other (list): _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Expenditures \$ _____

Ending Cash Balance, June 30, _____ \$ _____

I, the undersigned officer of the above-named organization/association, do hereby certify that this is a true and complete representation of the organization's financial activity for the _____ school year, to the best of my knowledge and belief. I further certify that, in accordance with the policy of the Stillwater Board of Education, I/we may be required to submit further financial information on the organization/association at the request of the board of education, and the failure to do so may result in revocation of the board's sanctioning approval.

Representative/Officer: _____ Date: _____

Title: _____

Received and reviewed by Chief Financial Officer:

Name/Title: _____ Date: _____

APPLICATION FOR SANCTIONING (Cont.)

ORGANIZATION/ASSOCIATION
UNAUDITED CASH FLOW STATEMENT **FOR UPCOMING SCHOOL YEAR (JULY 1 – JUNE 30)**

Name of Organization/Association: _____

FINANCIAL ACTIVITY FOR SCHOOL YEAR _____

Beginning Cash Balance, July 1, _____ \$ _____

Collections:

Fundraiser, Merchandise Sales, Etc. \$ _____

Donations \$ _____

Parent/Student Contributions \$ _____

Other (list): _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Collections \$ _____

Expenditures:

Fundraising Expenses \$ _____

Other (list): _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Total Expenditures \$ _____

Ending Cash Balance, June 30, _____ \$ _____

I, the undersigned officer of the above-named organization/association, do hereby certify that this is a true and complete representation of the organization's financial activity for the _____ school year, to the best of my knowledge and belief. I further certify that, in accordance with the policy of the Stillwater Board of Education, I/we may be required to submit further financial information on the organization/association at the request of the board of education, and the failure to do so may result in revocation of the board's sanctioning approval.

Representative/Officer: _____ Date: _____

Title: _____

Received and reviewed by Chief Financial Officer:

Name/Title: _____ Date: _____

APPLICATION FOR SANCTIONING (Cont.)

**ORGANIZATION/ASSOCIATION
INDEPENDENT REVIEW CERTIFICATION**

This form certifies that an internal audit committee, that is comprised of individuals who are independent from the club officers, conducted an annual audit of the club's financial records for the year ended. A minimum of two individuals performed this audit. The audit committee should be familiar with board policies CFBB and CFBB-P and should consider recommended internal controls for sanctioned organizations.

At a minimum, an audit consists of reviewing 12 months of bank statements for the organization and confirming that they reconcile to the Unaudited Cash Flow Statement submitted as part of the annual application for sanctioning.

Signing this independent review certification also indicates that all expenditures followed the requirements in board policy CFBB with particular attention to the requirement that,

- All funds raised by the organization will be used to achieve the stated purposes and goals of the organization. No administrative fees or stipends to officers or others will be permitted. Any payments to coaches or employees must be approved by and paid through Stillwater Public Schools.

To the best of their knowledge and belief, the internal audit committee of the above-named organization/association certifies that the financial activity of the organization for the _____ school year was in accordance with board policy, reconciles to the submitted unaudited cash flow statement, and all financial transaction were made in accordance with the organization's by-laws and procedures. (A minimum of two signatures required.)

Representative: _____

Date: _____

Representative: _____

Date: _____

Representative: _____

Date: _____

Representative: _____

Date: _____

Representative: _____

Date: _____