



Highland School District #203

P.O. BOX 38 – 17000 SUMMITVIEW RD
COWICHE, WA 98923
509-678-8630 FAX 509-678-4177

GIFTS/ DONATIONS

Directions: This report is to be submitted to the superintendent for each gift of material or monetary value of \$2,001.00 or greater. The report is to be submitted as the gifts are received.

SCHOOL BOARD POLICY NO. 6114 - GIFTS OR DONATIONS

The Board recognizes that individuals and organizations in the community may wish to contribute additional supplies or equipment to enhance or extend the instructional program. Any gift or donation to the district of real property can be accepted only by Board approval. Additionally, any gift or donation to the district or to an individual school or department of money, materials or equipment having a value of \$2,001.00 or greater will be subject to Board approval.

Gifts of less than \$2,001.00 can be accepted by the Superintendent or designee through a written letter of acceptance to the grantor. The Board will not authorize acceptance of gifts that are inappropriate, which carry with them unsuitable conditions, which will obligate the district to future expenditures from the general fund, or which are out of proportion to the value of the gift. All gifts will become district property and will be accepted without obligation relative to use and/or disposal.

Gifts of labor to support or complete a limited public works project with community volunteers will not normally be accepted by the Board. In general, gifts or donations of money to support or complete a limited public works project through the district's maintenance department will be accepted.

With the Board's approval, the district would like to accept the following gift(s): School: _____ Date gift received _____

Donor(s): _____

Donor address: _____

Approximate value of gift(s): _____

Designated use: _____

Will this donation create a gender inequity in activities and/or facilities? Yes No

*If yes, was the donor made aware of Title IX Rules and implications? Yes No

Please list the administrator or staff member who contacted the benefactor and include a brief description of the conversation: _____

Special conditions (if any): _____

Building Administrator: _____ Date: _____

Superintendent: _____ Date: _____

School Board: _____ Date: _____