EBR Parish School System

SAF Form #12

Athletic Fee Collection Approval Form

Teacher: _____ **School Year:** _____

Athletic Sport: _____

_____
Account Number / Account Name

Amount PER Student Requested to Collect: $_____ **APPROVED:**

_____ _____
Requesting Teacher ***Date*** ***Principal*** Date

** The Principal MUST approve this request prior to the collection of any athletic fees. A letter MUST be sent home to each parent notifying them of the amount and detailed use of the fee being collected. The items listed on this form must match the items listed on the parent letter.*

Athletic fees collected will be used for: Be Specific. The word "ETC" is NOT acceptable. The items listed here should match the items listed on the parent notification letter.

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All funds must be deposited daily.
The teacher MUST maintain a copy of the following:
A.) *This form once signed by the Principal approving the fee collection*
B.) *The letter sent home to parents notifying them of the amount and detailed use of fee collected*
C.) *An accurate and complete athletic roster of the students that have paid and that still owe athletic fees*
D.) *Yellow copies of School Deposit Receipts for their athletic account*
E.) *Yellow copies of Request for Withdrawals for their athletic account*
F.) *Receipt books*
G.) *Online Fee Collection Reports to support online fee collections*

A list of students' that have not paid the fees MUST be submitted to the office at year end. All documentation must be maintained for five (5) years.

Acknowledgment:

_____
Teacher's Signature Date

The teacher requesting to collect fees will be held accountable for their account, transactions, and financial documentation.