DONATION REQUEST FORM

Complete and return this form in-person, by email, or mail:

- Hand deliver to: ECU Dowdy Student Stores (Attention Store Manager), Wright Building 1st Floor
- Email to: studentstores@ecu.edu (indicate subject line as “Donation Request”)
- Mail to: ECU Dowdy Student Stores, Mail Stop 210, Greenville, NC 27858

NOTE: Request for donations must be received at least 10 business days before the event.

Today’s Date: ________________________ Event Date(s): ____________________________

Name of Organization (full name with no abbreviations): ___________________________________________

Contact Name: ______________________________________________________________

Phone: __________________________ Email: ________________________________

Event Details (Title, Description, etc.): _______________________________________________________

Location: __________________________________________ Estimated attendance at event: __________

Type and quantity of donation requested (please note all donation types cannot be met and may be substituted by Dowdy Student Stores):

________________________________________________________________________________________

To be approved, donations require a direct and specific benefit to ECU and are based on the current financial budget situation at Dowdy Student Stores. Please explain 1) the direct benefit to ECU; and 2) describe how Dowdy Student Stores will be recognized as a contributor to this event (use additional paper if needed to complete this section and/or attach event agenda, program, etc.):

________________________________________________________________________________________

Date requested donation needed by (requests submitted not within 10 business days before event will not be considered):

________________________________________________________________________________________

FORM MUST BE RECEIVED AT DOWDY STUDENT STORES MAIN OFFICE AT LEAST 10 BUSINESS DAYS BEFORE THE EVENT.

DOWDY STUDENT STORES OFFICE USE ONLY

Date Received at Dowdy Student Stores: ________________________

Donation Given: ____________________________________________________________

Donation inventory adjustment form completed? YES _____ NO _____ Initial and Date: ______________________

I PICKED UP THE ABOVE ITEM(S) FOR MY ORGANIZATION REQUESTING DONATION:

Print Name: __________________________ Signature: __________________________ Date: ______________________