



MT. VERNON

COMMUNITY SCHOOL CORPORATION

"Engage, Educate, and Empower Today's Students"

GIFTS, GRANTS, AND DONATIONS APPROVAL FORM

Reference Policy F275

Instructions: Please complete the following form and submit it to the Business Office for review and approval.

Donor Information

- **Full Name/Organization Name:** Forum Credit Union Foundation, Inc.
- **Contact Person (if applicable):**
- **Address:** 11313 USA Parkway
- **City, State, ZIP Code:** Fishers, IN 46037
- **Phone Number:**
- **Email Address:** foundation@forumcu.com

Donation Details

- **Type of Donation:** _____ Check _____
- **Description of Donation:**
Enhancing Environmental Education through Permanent Garden Signage
- **Estimated Value** (Gifts or donations over one hundred dollars (\$100.00) must be accepted by the School Board prior to the receipt of such gifts or donations) : \$ _1200.00 _
- **Date of Donation:** _____ 09/16/2025 _____
- **Purpose/Intended Use of Donation:**

Funds to purchase signage for outdoor garden

___ Please click here if the donor wishes to remain anonymous.

___ Please check here if the donor will be in attendance at the board meeting for which their donation will be accepted.

Recipient's Name: _Jessica Buell for First Grade

School's Name: Mt. Comfort Elementary School



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Donor Information

- **Full Name/Organization Name:** TechPoint Foundation for Youth
- **Contact Person (if applicable):** Andy Fulton
- **Address:** 5255 Winthrop Avenue, Suite #4
- **City, State, ZIP Code:** Indianapolis, IN 46220
- **Phone Number:**
- **Email Address:** Andy@TechPointYouth.org

Donation Details

- **Type of Donation:** _____ Equipment _____
- **Description of Donation:**
Vex Go Classroom Bundle
- **Estimated Value** (Gifts or donations over one hundred dollars (\$100.00) must be accepted by the School Board prior to the receipt of such gifts or donations): \$ _2700.00_
- **Date of Donation:** _____ 08/15/2025 _____
- **Purpose/Intended Use of Donation:**
This is a Vex set that is designed for students in grades 3-4 to use. It will be used in STEM class and for after school activities.

☒ **Please click here if the donor wishes to remain anonymous.**

☐ **Please check here if the donor will be in attendance at the board meeting for which their donation will be accepted.**

Recipient's Name: Amy Lovell

School's Name: Mt. Comfort Elementary School

For Office Use Only

Received By: _____

Date Received: _____

School Board Approved Date: _____