



Parent Advisory Group (PAG) FUNDRAISING PLAN

KINDERGARTEN AND EARLY CHILDHOOD SERVICE

WEST WIMMERA SHIRE COUNCIL

The goal of the Kindergarten Parent Advisory Group (PAG) in fundraising is to provide additional equipment or experiences, beyond the day-to-day materials provided by West Wimmera Shire Council, for children and families to enjoy in the year/s they are at the kindergarten.

This plan is designed to assist the PAG to undertake fundraising for items of agreed importance, ensuring consultation occurs between the PAG and the kindergarten, and that the funds raised are then spent on the advertised or agreed upon goal which is based on identified needs of the program. Please note it may take multiple fundraisers to raise the amount needed for a project.

Please submit this plan to the kindergarten teacher two weeks before commencing any fundraising, who will then submit to the manager for approved provider approval. You will then receive the signed document back. It is a Department of Education (DE) to have a fundraising plan to ensure funds are planned and spent for a specific purpose.

Kindergarten			
Fundraiser start date			
Fundraiser end date			
Name of fundraising activity			
Fundraising goal <i>(equipment/project, including estimated cost)</i>			
Details of fundraising activity: <i>(event details; company supplying product; any relevant information)</i>			
How are kindergarten families expected to participate: <i>(every family to sell a box/ attendance/etc)</i>			
WWSC involvement: <i>(staff attendance at an event/ use of venue/etc)</i>			
Kindergarten PAG Representative	Name	Signature	Date
Kindergarten Teacher	Name	Signature	Date
Manager	Name	Signature	Date

Thank you for your contribution to the Kindergarten!



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Once the fundraiser is complete, please fill out the following and submit to the Kindergarten Teacher.

Kindergarten			
Fundraiser date			
Fundraising goal			
Financial outcome	Total collected	Expenses	Profit
Goal purchased (<i>equipment/activity/etc; company and date</i>)			
Amount spent			
Amount banked (<i>if any</i>)			
Amount still required to reach goal (<i>if any</i>)			
Plan to reach goal (<i>additional fundraiser/ amount contributed from reserves/ apply for grant</i>)			
Kindergarten PAG Representative	Name	Signature	Date
Kindergarten Teacher	Name	Signature	Date
Manager	Name	Signature	Date

Thank you for your contribution to the Kindergarten!