## **Donation Acceptance Policy Exception Form**

## **Donor Information**

Donor Name
Organization (if applicable)
Contact Information
t .
Donation Information
Type of Donation
Estimated Value
Description of Donation
Deliev Eveention Degreest
Policy Exception Request
Describe the policy exception being requested
Justification for Exception
·
Department/Program
Department/Fiogram
Submitted by
Submitted by
Name
 Title
Date