Exhibit A

OAKLAND UNIVERSITY
APPLICATION FOR GAME OF CHANCE APPROVAL

1) Type of Game of Chance requested:
2) Reason for request:

3) Name of sponsoring organization: ____________________________
   Address: ____________________________
   Telephone: ____________________________

4) University Department that will supervise the event:
5) Fund # and subaccount to charge for application fee:
6) Date of event: ________________ 20__,
7) For Raffle-Time of Drawing:
8) Location of event:

9) Expected proceeds:
10) Purpose for which proceeds will be used:

11) Probable audience or participants:

12) Prize(s) to be offered:

   1st Prize: ____________________________
   2nd Prize (if applicable): ____________________________
   3rd Prize (if applicable): ____________________________

13) For Raffle-Ticket Price:
14) Aggregate value of prizes:

15) Probable source of prizes (if donated):
16) APPROVALS

Signature and Title of Sponsoring Organization Representative: ____________________________ Date

Signature of Department Head: ____________________________ Date

Signature of Vice President: ____________________________ Date

Signature of Vice President for University Relations: ____________________________ Date