Employee Giving Form

I. Employee Information

First Name: _____ Last Name: _____

ID Number: _____ Department: _____

Campus Email: _____

Check One: ☐ Faculty ☐ Staff ☐ Biweekly Staff ☐ Adjunct ☐ Part-Time

II. Gift Information

(*If you have a current payroll deduction, see Payroll Deduction section first.*)

My gift should be applied to:

☐ Fund for Campbell

☐ Other Fund (please be specific) _____

If this section is not completed, we will continue to credit the designation of your last gift. If no former designation, it will go to the Fund for Campbell.

III. Payroll Deduction

Section I

☐ Please BEGIN a payroll deduction. (Check if you do not have an active payroll deduction)

☐ Please CONTINUE my current payroll deduction and make no changes. (Please provide signature in section IV)

☐ Please END my current payroll deduction and begin a NEW payroll deduction. (If you want to change your current payroll deduction by either amount or designation, check this box and complete the Gift Information section above.

Amount to be deducted per pay period $ _____

Section II

Choose one of the following:

☐ This pledge should be ongoing and not end until I notify the payroll and Annual Giving offices.

☐ Payroll deduction should end (month/year): _____ /_____

☐ This is a one-time gift of $ _____ to be made via payroll deduction in ☐ March ☐ April ☐ May

IV. Cash or Check Gift

I've enclosed my form and a cash or check gift for: $ _____

IV. Signature

Employee Signature (required): _____ Date: _____

☐ I choose to remain anonymous for my gift

FOR OFFICE USE ONLY

Team Number: _____

Gift Method: _____

Fund Code: _____