

## Faculty/Staff 2014-15 Gift and Pledge Form

This is a fillable form. Please type or write in the blanks, print it out and return it to the address indicated below.

□ Mr. □ Mrs. □ Ms. □ Dr.			
	Name (as you	wish it to app	ear in publications)
☐ I wish to remain anonymous i	n publications/recognition.		
Division/Department:			Employee ID:
Home Address:			
City:		State:	Zip:
Work Phone: ()	Work E-mail:		Personal E-mail:
	me Faculty/Staff, 10 months at Faculty/Part-time Staff	o your exi	isting payroll pledge.
I would like to like to direct m	ny unrestricted gift as follows	s:	
( ) Annual Fund Support provides the College with the greatest flexibility on how best to direct your support. Gift Amount:\$	( ) General Scholarship Support provides add flexible student schol awards.  Gift Amount:\$	litional larship	( ) Faculty/Staff Mini-Grants  Support funds Student Learning Improvement Grants, which are projects that improve teaching and are proposed by faculty and staff members. Gift Amount:\$
Special Instructions:			
☐ My gift will be matched by 1	my spouse's company		
			Company name
_	payable to MCCC Foundation.	www mag	o odu/givo
	-	ww.mcc	c.edu/give.
☐ PAYROLL DEDUCTION	(please choose one)		
	from each paycheck, beginning tify College Advancement of a	_	ary 2015. I understand that this <b>Recurring Gift</b>
☐ Please deduct \$p	per paycheck, beginning in Jan	uary 2015	, for a total gift of \$
	Thank	, Vyou	<b>4</b>
Printed Name:	Signature:		Date:

Return your completed form to Development, West Windsor Campus – AD112