

# Gillette College Foundation Gift or Pledge Form



## GENERAL INFORMATION

Donor / Business Name \_\_\_\_\_

Primary Contact \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_ E-Mail \_\_\_\_\_

## GIFT OR PLEDGE INFORMATION

Total Amount\* \_\_\_\_\_  Lump Sum  Pledge (\*\*please see Payment Schedule)

### Investment Type

**Endowed**  
(\$10,000 or above) In an endowment account, only the earnings generated by the principal are expended. The principal is preserved in perpetuity so that earnings will be available year after year for the purposes intended by the donor.

**Expendable**  
(Under \$10,000) In an expendable account, funds are to be spent in full, either in one year or subsequent years, depending on the amount of money available.

**Annual**  
(Under \$1,000) These funds are treated as pass-through accounts, are spent during the following twelve months, and do not earn interest.

\*\*Payment Schedule  Yearly  Monthly Number of Payments \_\_\_\_\_

THANK YOU FOR YOUR SUPPORT!

You may publicize my name as a college supporter  No  Yes

If yes, please list me in the following manner \_\_\_\_\_

\_\_\_\_\_  
*Donor or representative signature* *Date*

\_\_\_\_\_  
*Gillette College Foundation Representative* *Date*

**Please make your check payable to Gillette College Foundation and send to 300 West Sinclair, Gillette, WY 82718**

*\*This donation may be assessed up to a 2% administration fee.*

*Gillette College Foundation is a 501(c) (3) charitable organization. Tax ID# 830284135. Your contribution is tax-deductible within the extent of the law.*

# Gillette College Foundation Donation Criteria



## DONOR INFORMATION

Name of Donor \_\_\_\_\_

## GIFT/PLEDGE INFORMATION

<b>Purpose</b>	<input type="checkbox"/> Program _____ <input type="checkbox"/> Scholarship _____ <input type="checkbox"/> Capital Project _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> Need-Based Grant _____
<b>Other Pertinent Information</b>	_____ _____ _____

## SCHOLARSHIP INFORMATION

Scholarship Name \_\_\_\_\_

Number of Scholarships per Year \_\_\_\_\_ Amount of each Scholarship \_\_\_\_\_

<b>Award Open To</b> <input type="checkbox"/> Traditional students (recent high school graduate) <input type="checkbox"/> Non-traditional students (age 25 or older) <input type="checkbox"/> Either	<b>Maximum semester enrollment</b> <input type="checkbox"/> Full-time (12+ hours) <input type="checkbox"/> Part-time (6+ hours) <input type="checkbox"/> Either
<b>Minimum GPA required</b> (Standard recommendation is 2.0 GPA.) <input type="checkbox"/> Yes, minimum GPA should be _____ <input type="checkbox"/> No preference	<b>Do you prefer to support students enrolled in</b> <input type="checkbox"/> Vocational/Occupational Programs (2-year degree or certificate programs) <input type="checkbox"/> Transfer Programs (plan to finish at a 4-year institution) <input type="checkbox"/> Either
<b>Do you prefer to support students in a program?</b> <input type="checkbox"/> Program Name _____ <input type="checkbox"/> No preference	<b>Do you prefer that applicants graduated in a specific year?</b> <input type="checkbox"/> Yes, graduation year(s) _____ <input type="checkbox"/> No preference
<b>Do you prefer that applicants be a graduate of a particular high school within Campbell County?</b> <input type="checkbox"/> Yes, name of high school _____ <input type="checkbox"/> No preference	<b>Do you want: (Select all that apply)</b> <input type="checkbox"/> To exclude "company-sponsored" (those being reimbursed by their employer) students from receiving your scholarship? <input type="checkbox"/> To exclude students receiving government grants or WIA? <input type="checkbox"/> Student to receive a check for any remainder after tuition, fees, and books have been paid?
<b>Would you like the scholarship to be renewable a second year to the same student when applicable?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No preference <b>Other Preferences</b> _____ _____ _____	

Scholarship recipients will send thank you letters to the donors via the Gillette College Foundation. The Foundation will transmit these letters to the fund primary contact unless noted below:

Name \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

**NOTE: Laws governing charitable deductions dictate that a scholarship cannot be awarded to a student related to the scholarship donor, nor be an employee of the scholarship donor.**

Gillette College Foundation will send financial reports on an annual basis detailing the fund transactions and current balance. The Foundation will send these reports to the fund primary contact unless noted below:

Name \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

\_\_\_\_\_  
Donor or representative signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Gillette College Foundation Representative

\_\_\_\_\_  
Date