

# Faculty and Staff Giving Form

**WE CARE  
WE COUNT**

faculty and staff giving campaign

Name \_\_\_\_\_ Dept \_\_\_\_\_

EMPLID \_\_\_\_\_ Campus Phone \_\_\_\_\_

Email \_\_\_\_\_ Cell Phone \_\_\_\_\_

Contributions of \$25.00 or more qualify you for a WCWC T-shirt while supplies last. Please select from the size options listed:

**S M L XL 2XL 3XL Opt out\***

*\*If no T-shirt size is chosen, opt out will be automatically selected.*

## 1 Make Your Gift

Any recurring gifts established with this form replaces any existing recurring gift or pledge. To change existing recurring gifts, contact Gift Administration at 940-369-8200 or [giving@unt.edu](mailto:giving@unt.edu).

I would like to make a one-time gift of \$ \_\_\_\_\_.

I would like to make a monthly recurring gift of \$ \_\_\_\_\_ until I request otherwise.

I would like to pledge a total of \$ \_\_\_\_\_ to be fulfilled in 2-12 months.

## 2 Support Your Cause

Please include the total gift you wish to make per designation. You may designate your gift to any area at UNT.\*

\$ \_\_\_\_\_ to \_\_\_\_\_  
*Fund Name*

\$ \_\_\_\_\_ to \_\_\_\_\_  
*Fund Name*

\$ \_\_\_\_\_ to \_\_\_\_\_  
*Fund Name*

*\*If left blank, your gift will be designated to The UNT Fund.*

_____
_____
_____
_____
_____
<b>For Gift Administration Use Only</b>

## 3 Choose Your Method

### Payroll Deduction

Payroll deductions pledged during the WCWC Campaign will begin deducting on the June paycheck.

### Credit/Debit Card

I would like to be contacted to give via credit card.

### Personal Check

I have enclosed a check made payable to UNT.

*I prefer to make this gift anonymously.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return this form to Gift Administration/Advancement using a campus mail envelope.

Questions? Contact The Annual Fund at UNT at [wecarewecount@unt.edu](mailto:wecarewecount@unt.edu) or call 940-565-3468.