

## employee giving donation and payroll deduction form

## **FOUNDATION**

First name N	Middle initial	Last		
Department	Division		Room _	Ext
Email	[] full-time fac	culty/staff [] a	adjunct faculty	part-time staff
I will give \$ (total amount	of gift or pledge)	☐ I would	like this gift to	remain anonymous
Payment method [] Cash [] Check - nu	mber			
☐ Payroll deduction \$ amount per pay period	number of pay period	$=\frac{1}{total\ per\ ye}$	ar number of y	ears
☐ Credit card payments can be made at starks	tate.edu/EmployeeG	iving \$		
			amount	date
I designate my gift to support	amount per pa	y if applicable	total	
Stark State College Foundation general fund	\$		\$	
☐ General student scholarships	\$		\$	
☐ Faculty Association student scholarship	\$		\$	
☐ Lamplighter Emergency Grant Fund	\$		\$	
Spartan Food Fund	\$		\$	
Other	\$		\$	
name of fund or scholarship:				
☐ I want to create my own scholarship - name:				
Contact Heather Coontz, ext. 4415 or heoontz	;@starkstate.edu to sch	edule an appoint	ment to create you	ur scholarship
Signature	ame to verify your donati		Date	

Complete and return your signed pledge form to *foundation@starkstate.edu*, return to S306 (main campus) or mail to Stark State College Foundation, 6200 Frank Ave. NW, North Canton, OH 44720.

Thank you for your generosity

Stark State College Foundation is a 501(c)(3) tax-exempt corporation. Your donations are tax-deductible. Our mission is to open doors to relationships and resources that support the success of our students, partners and communities. Our vision is that all students have access to the resources they need to achieve their academic and career goals.