

# Faculty and Staff Giving Form

Full Name: \_\_\_\_\_ CWID# \_\_\_\_\_

Job Title: \_\_\_\_\_ Department: \_\_\_\_\_

Campus Phone: \_\_\_\_\_ Campus Email: \_\_\_\_\_@cofc.edu

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Email: \_\_\_\_\_

## Method of Payment

### Payroll Deduction

*Deductions will begin with the first possible pay period unless you indicate otherwise.*

I authorize a payroll deduction of \$ \_\_\_\_\_ per pay period (twice a month) as a recurring gift.  
*I understand that payroll deductions will continue until I request otherwise.*

I authorize a payroll deduction of \$ \_\_\_\_\_ (amount) for \_\_\_\_\_ (number of) pay periods equaling a total gift of \$ \_\_\_\_\_.

### Credit Card

I will visit [www.cofc.edu/giving/](http://www.cofc.edu/giving/) to make a credit card pledge. (Please complete the contact info above and return this form with this option indicated.)

### Check

I am enclosing a one-time gift of \$ \_\_\_\_\_ via check made payable to College of Charleston Foundation.

**Designate my contribution as follows** (The amounts you designate to each fund must total the overall gift amount you indicate in the above section.):

\$ \_\_\_\_\_ College of Charleston Fund

\$ \_\_\_\_\_ Advocates for Education, Health, and Human Performance Fund

\$ \_\_\_\_\_ Dean's Excellence Fund – School of the Arts

\$ \_\_\_\_\_ Dean's Excellence Fund – School of Business

\$ \_\_\_\_\_ Dean's Excellence Fund – The Graduate School

\$ \_\_\_\_\_ Dean's Excellence Fund – Honors College

\$ \_\_\_\_\_ Dean's Excellence Fund – School of Humanities and Social Sciences

\$ \_\_\_\_\_ Dean's Excellence Fund – School of Languages, Cultures, and World Affairs

\$ \_\_\_\_\_ Dean's Excellence Fund – School of Sciences and Mathematics

\$ \_\_\_\_\_ Friends of the Library Fund

\$ \_\_\_\_\_ Parents' Fund

\$ \_\_\_\_\_ Student Affairs Excellence Fund

\$ \_\_\_\_\_ Other Fund \_\_\_\_\_ (Visit [www.cofc.edu/giving/](http://www.cofc.edu/giving/) for additional fund designations.)

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