



WASHINGTON COLLEGE
FACULTY & STAFF CONTRIBUTION FORM



Thank you for all you do for Washington College. Your gift sets a strong example for students and makes a difference in their experiences here, and your contribution helps those outside WC understand why our institution is so special. Thanks for helping WC to SHINE!

Required Information:

Name

Department

Email Address

College ID #

Option 1 Payroll Deduction: (minimum \$1.00)

- Recurring payroll deduction (indicate biweekly deduction below)
- One time payroll deduction (indicate one time deduction below)

Please designate my gift(s) as follows:

Biweekly or One Time Amount

The Washington Fund Scholarships \$ _____

Other: _____ \$ _____

*I authorize Washington College to deduct this payment from my paycheck.
I understand this deduction will begin in the next pay period.*

Signature

Date

Option 2 Direct Gift

- Cash
- Check (please make checks payable to *Washington College*)
- Credit Card (please use the Washington College giving page: give.washcoll.edu)
One time, monthly, quarterly and annual options are available online
- Text-to Donate (please text @washcoll to 52014)

Please designate my gift(s) as follows:

Gift Amount:

The Washington Fund Scholarships \$ _____

Other: _____ \$ _____

- I choose not to give at this time.

Thank you! Please return this form by campus mail to the Alumni House.