

# Inver Hills Community College Foundation

## 2014-2015 Faculty & Staff Pledge Drive



OF INVER HILLS COMMUNITY COLLEGE

**YES!** I want to be an everyday hero who makes a lasting difference in the lives of our students!

Name: \_\_\_\_\_

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

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

### PAYMENT OPTIONS

To show my support for IHCC students, I would like to:

- MAKE A PLEDGE VIA PAYROLL:** \$ \_\_\_\_\_ /pay period
- MAKE A ONE-TIME GIFT VIA CASH OR CHECK:** \$ \_\_\_\_\_
- MAKE A GIFT VIA CREDIT CARD AT GIVE.INVERHILLS.EDU**
- CONTINUE MY EXISTING PLEDGE; NO CHANGES NECESSARY**
- I am not able to participate at this time

Annual Pledge Amount	Per Pay Period	Potential Benefit to Students
\$1,950	\$75 x 26 weeks	One semester (12 credits)
\$1,040	\$40 x 26 weeks	A scholarship
\$650	\$25 x 26 weeks	One 3-credit class
\$390	\$15 x 26 weeks	One 2-credit class
\$130	\$5 x 26 weeks	One new textbook
\$78	\$3 x 26 weeks	One used textbook
\$52	\$2 x 26 weeks	School supplies

### GIFT DESIGNATION

I would like my gift to support:

(please specify if you would like your gift split):

- Inver Hill's greatest needs
- Student scholarships and programs
- Dreamkeepers Fund for emergency financial assistance
- Tuition Match MN (former FAIM program)
- Other - please specify\*\*: \_\_\_\_\_

### LEAVE A LEGACY

- I have included the Inver Hills Community College Foundation in my estate plans
- I would like information about including the Inver Hills Community College Foundation in my estate plans

### PAYROLL DEDUCTION AUTHORIZATION

I understand my payroll deduction will continue until I stop by contribution.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Employee ID: \_\_\_\_\_

**Please enclose form in envelope, seal and return it to Mary Dimick at the Foundation Office (LA228). Gifts to the Foundation are tax deductible.**

\*\* See Foundation website for list of existing scholarships and funds at [give.inverhills.edu](http://give.inverhills.edu)