YOUR INFORMATION	
Name (Print):	Date:
Department:	
Email Address:	
□ Please make my gift anonymous	
GIFT DESIGNATION OPTIONS - There is no limit to the number of funds to which you can contribute.	
Retention Scholarship – provide the critical funds to prevent students from being dropped after fee payment deadline.	
Excellence Fund — support where there is the greatest need. College Excellence Fund — supports scholarships, faculty excellence and student apparement apportunities.	
College Excellence Fund – supports scholarships, faculty excellence and student engagement opportunities College College	
□ Other Department, College or Fund_	
To talk further about giving options, please contact the Development Office at ext. 4470	
□ I wish to split my gift as designated below. <i>Please add additional lines if necessary</i> .	
Department, College or Fund	
Department, College or Fund	
\$1,000 become a "Dream Maker" — establish an annual scholarship where one student can b	
□ Laker Completion Fund — support students needing help with outstanding tuition or fees.	\$
WAYS YOU CAN GIVE	
Please return form (and cash/check, if applicable) to the Office of Development, Woodlands Hall, Office 204	
OPTION 1 One-time Online Giving — make a credit card gift on our secure giving site: clayton.	edu/giving/faculty-staff-fund-drive
OPTION 2 One-time Gift – cash / check	
CHOOSE ONE OF THE FOLLOWING OPTIONS	
I/We would like to contribute \$	
☐ My check payable to the CSU Foundation is attached. \$(total)	
□ Cash \$(total)	
OPTION 3 Recurring Gift – make an automatic deduction from credit card or bank account on our secure giving site by visiting	
clayton.edu/giving/faculty-staff-fund-drive	
Continuous gifts will be recurring until you contact Dana Brown, DanaBrown@clayton.edu, to discontinue your gift.	
OPTION 4 Payroll Deduction – make a gift through payroll deduction (Gifts will be deducted beginning January)	
☐ One-time option, 1 x \$ January payroll.	
☐ Monthly option, 12 x \$ = for a total of \$	
□ Academic Faculty option, 10 x \$ = for a total of \$	
☐ Biweekly option, 24 X \$ = for a total of \$	_
Signature:	Date:
Signature Required – I authorize payroll deduction from Jan – Dec of the coming year to the Clayton State University Foundation You may return your signed form via email to CSUfoundation@clayton.edu Minimum deduction of \$2 per pay period. Deduction authorization may be canceled at any time by written request to the payroll department.	
MATCHING GIFTS	
Matching Gifts are a great way to increase the value of your contribution.	
☐ Enclosed is a Matching Gift form from my company or my spouse's company.	
□ I completed my Matching Gift form online. (Please provide matching company name)	
All contributions to the Clayton State University Foundation are tax deductible as allowed by law.	



WE BELIEVE IN MAKING DREAMS REAL.



Thank you for your commitment to Clayton State University and our students!