

Name: _____ **ID#:** _____

Department: _____ **Date:** _____

I pledge \$ _____ per pay period, for a total of \$ _____ annually.

(Your payroll deduction will be continuous. To make changes to your deduction, please contact Lisa St. Hilaire at 603-629-4641 or l.sthilaire@snhu.edu.)

Begin the payroll deduction on:

the next available pay period.

specific date

Examples of pledges for a year based on payroll cycle:	
<u>Giving Levels</u>	<u>26 Pay Periods/Year</u>
\$2,500	\$96.16/period
\$1,000	\$38.47/period
\$500	\$19.24/period
\$250	\$9.62/period
\$100	\$3.85/period

FUND DESIGNATION (A list of current scholarship funds can be found at alumni.snhu.edu/scholarships.)

- I designate my pledge to help meet the university's most urgent needs.
- I designate my pledge to a specific fund (specified below):

Signature: _____ **Date:** _____

Please print your name(s) below exactly as you wish it to appear in any publications:

Return the completed form to the Office of Institutional Advancement for processing. Thank you!

For use by Development/Payroll:			
1) Complete by Development. 2) Transmit to Payroll. 3) Complete by Payroll. 4) Copy completed form to Development.			
Development Office:	Date Received:	Received by:	<input type="checkbox"/> New <input type="checkbox"/> Replace <input type="checkbox"/> Addition
Payroll Office:	Date Received:	Received by:	
Date deduction will start:			