



Name \_\_\_\_\_ Class year \_\_\_\_\_ Date \_\_\_\_\_

Home address \_\_\_\_\_

Department \_\_\_\_\_ Telephone ext. \_\_\_\_\_

I wish to remain anonymous       I would like to designate my gift (see below)

I authorize Salve Regina to deduct the following gift from my paycheck:

I wish to make a continuous pledge. Please deduct \$\_\_\_\_\_ for each pay period until further notice.

I wish to make a gift of \$\_\_\_\_\_. Please deduct in equal payments for \_\_\_\_\_ pay periods beginning with the next pay period.

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

**Please designate my gift to...**

- The SALVEfund
- Annual University Scholarships
- Academic Programs \_\_\_\_\_
- Arboretum Fund for Salve Regina
- Catherine's Cupboard
- Compass Experiential Learning Fund
- McKillop Library Endowment
- Pell Center Support
- Performing Arts
- Seahawk Athletics \_\_\_\_\_
- Salve Student Service Immersion Fund
- University Endowment
- Other \_\_\_\_\_

**Scholarships...**

- Bottari Family Scholarship
- Circle of Scholars Endowed Scholarship
- Dr. Kelli J. Armstrong Scholarship
- Endowed Scholarship in Visual Art
- Gateway Fund for Salve Regina
- Graduate Alumni Scholarship
- Judith A. Keenan Scholarship
- Dr. Christopher Kiernan Memorial Scholarship
- Nursing Alumni Scholarship
- Sisters of Mercy Endowed Scholarship
- Study Abroad Scholarship
- Theatre Arts Alumni Scholarship
- University Endowed Scholarship
- Vision of Mercy Endowed Scholarship

**Gifts by credit card are accepted online: [www.salve.edu/give-salve](http://www.salve.edu/give-salve).**

For information regarding your gift, please call the Office of Advancement x 2902.  
The University asserts that no goods or services are provided in consideration of your contribution.  
The fiscal year ends June 30.

**Return the completed form to the Office of Advancement, Ochre Court, Rm 316 or email [advancement@salve.edu](mailto:advancement@salve.edu).**