

YES! I would like to make a gift to A&S.

Contact and general information

Name _____
first middle initial last maiden

Class Year _____ Degree _____ Major _____

Address _____
Street City State Zip

Home Phone _____ Email _____

If married, what is your spouse's name? (first, middle initial, last, maiden) _____

Is your spouse an SU alumnus? Yes, from the Class of _____ No

Are you the parent(s) of a currently enrolled Arts and Sciences student? Yes No Name(s)? _____

Please indicate the amount (\$ _____) and allocation of your gift.

The College of Arts and Sciences Dean's Fund Arts and Sciences Scholarships
 Other _____

Payment method

Enclosed check or money order, payable to Syracuse University
 American Express Discover MasterCard Visa

Name of cardholder as it appears on card _____

Card number _____

Expiration date _____

Signature _____

Employment information

(Gifts from Arts and Sciences employees count toward faculty-staff participation.)

Company name _____

Your title _____

Street address _____

City, state, zip _____

Business phone _____

Email _____

Does your employer or your spouse's employer participate in a matching gift program?

- Yes, matching form is enclosed.
 Yes, matching form will be mailed separately.
 Not sure, please check _____
 I have included the College of Arts and Sciences in my estate plans.
 Please send me information about how to include the College in my will or to make a gift that provides me with income.
 Please contact me to discuss my plans for the College.

Mail your gift to

Syracuse University Advancement Services
640 Skytop Road, 2nd floor
Syracuse, NY 13244

Questions? 315.443.1848