
Faculty and Staff Payroll Deduction Giving

Yes! I'd like to support U of S students and faculty, helping all of us to succeed!

Attention: Controller, University of Saskatchewan

You are hereby authorized and instructed to make the following deductions from my salary as outlined below:

Option 1:

I'd like to give \$ _____ per month for _____ months for a total of \$ _____ ,
starting _____ (MM/DD/YY) and ending _____ (MM/DD/YY).

Option 2:

I'd like to give \$ _____ per month until further notice (upon receipt of cancellation in writing).

I'd like my gift to support:

- General Scholarships The President's Fund CUPE Scholarships
 ASPA Scholarships Other (please specify)

This is a joint gift with my spouse: Yes No

His/her full name: _____

Thank you!

In recognition of your gift, the university honours campus community donors on occasion through invitations to special events, listings in online and print publications, and provides updates on the impact of your giving.

If you choose not to be publicly recognized for your gift, we will honour your wishes.

Please check any or all of the following:

- Do not publish my name with regard to this gift.
 Do not publish my name with regard to all gifts.

Signature: _____ **Date:** _____ (MM/DD/YY)

Printed name: _____ **Campus phone:** _____

Campus address: _____

Yes! I am interested in learning more about other ways I can support my university, including gifts of stock, life insurance, and bequests.

