Employee Payroll Deduction Form

WCSU Foundation

Thank You!

As a member of the WCSU family, your support is particularly meaningful. We at the Foundation continue to be inspired by the selfless generosity of WCSU employees.

Title		
First Name	*	Unrestricted Giving Level Memberships
Last Name	*	(Biweekly deductions)
Department	*	President's Club \$38.50
Phone	*	WCSociety \$19.00
Email	*	Century Club \$4.00
Street Address Line 1	*	Fairfield Hall Society \$29.00
Street Address Line 2	*	
City	*	
State	*	
Zip	*	

Unrestricted

Please direct my gift to: General Scholarship Fund

Other

If Other please specify:

Payroll Deduction

I authorize WCSU to deduct from each of my bi-weekly paychecks until advised to stop (dollar amount):

I request a one-time payroll deduction from my paycheck of (dollar amount):

Signature

Signature:

Date:

*

Each year, the university lists donors, by gift category, in a published report. How do you wish your name to appear?

*

Please print full name

If you prefer not to be included in such a publication, please check here.

Please forward this form to: veilleuxm@wcsu.edu

Maria Veilleux, Institutional Advancement, 106 University Hall. For Questions, (203)-837-8479 *