

### PERSONAL INFORMATION

\*Last Name                                      \*First Name                                      Middle Initial                                      \*Employee ID

\*UTPB Email                                      Extension                                      \*Department & Office Room #

Personal Email                                      Phone: specify (H) (C) (O)                                      \*Home Address

**\*Required**

Check all that apply:

- Faculty                       Staff                       Alumni                       Current UTPB Student                       Parent of Current Student

### PAYROLL DEDUCTION (minimum of \$5.00 per month)

- \$5/mo. (\$60/yr.)                       \$10/mo. (\$120/yr.)                       \$25/mo. (\$300/yr.)                       \$50/mo. (\$600/yr.)  
 \$84/mo. (\$1,008/yr.)                       \$ \_\_\_\_\_ /mo. (\$ \_\_\_\_\_ /yr.)

### GIFT INFORMATION

Please direct my gift in the following manner:

- General Scholarship Fund** – Leave a legacy by contributing to this flexible and impactful scholarship.  
 **Student Emergency Fund** – Help support a talented student in need, no matter their situation.  
 **Athletics (Champions Fund)** – Fully supporting student-athlete scholarships. View benefits on [utpbfalcons.com/championsfund](http://utpbfalcons.com/championsfund).  
 **University Enhancements** – Let's attract new students and faculty by enhancing campus together.  
 **College/Program/Sport Specific/Department** (please specify) \_\_\_\_\_  
 **Other** (please specify) \_\_\_\_\_

I voluntarily authorize this monthly deduction from my after-tax wages for a charitable contribution as indicted above. I acknowledge there is a minimum of \$5.00 per month, per employee/donor, to participate in the payroll deduction program. I am aware that this is an ongoing gift to UTPB that will remain in effect until revoked in writing to the Payroll Office by the employee/donor.

Signature

Date

### RETURN THIS FORM TO THE ADVANCEMENT OFFICE:

- By email: [development@utpb.edu](mailto:development@utpb.edu)
- In person: Mesa Building 4230 (4th Floor)

#SUPPORTANDSOAR

### THIS SECTION FOR ADVANCEMENT OFFICE USE ONLY

Account Name	Cost Center	Fund	Function	Department