

Donor Designation Worksheet

Contact Person (Include title if officer of organization) _____

Organization (if applicable) _____

Address _____

City _____ State _____ Zip _____

Primary phone _____ Secondary phone _____

Email _____

Additional Contact Person (Include title if officer of organization) _____

Organization (if applicable) _____

Address _____

City _____ State _____ Zip _____

Primary phone _____ Secondary phone _____

Email _____

FUND NAME Write the complete name of the new fund. _____

RESTRICTION FUND TYPE

 Choose one.

- Temporarily restricted/current fund.** Full amount of gift will be expended according to donor purpose.
- Permanently restricted/endowed fund.** Principal amount of gift to be held in perpetuity, and only earnings may be expended for the purpose set forth below. **A minimum gift or multi-year pledge (up to five years) of \$25,000 will activate an endowment. No earnings shall be distributed until the gift has been paid in full.** If the gift is not paid within the 5 year period, this gift may be, at the option of the University, transferred into a restricted fund and expended for the originally intended purposes.
- Unrestricted.** Full amount of gift will be expended where most needed, as determined by the University president.

FUNDING COMMITMENT

 Choose one.

- Amount of initial donation** \$ _____
It is the intent of the donor to fund this amount annually. Yes No If yes, for a period of ____ years
- Amount of first pledge** (Endowed Fund) \$ _____
It is the intent of the donor to fund this named endowment within ____ years.

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FUND CATEGORY Choose one fund category from the three listed below.

- PROGRAM** Examples include student internships, speakers' series, faculty/staff support, research and student performances. This category does not include student financial aid.

- FACILITIES/FURNITURE/EQUIPMENT** Examples include buildings, furniture, equipment, and golf carts.

- SCHOLARSHIP** Examples include direct student financial aid to pay direct costs associated with attendance at Lincoln University.

PROGRAM OF STUDY Choose one.

- There is no program requirement for this award
 Recipient must be enrolled in the following program(s)

Please list _____

ENROLLMENT STATUS Choose one.

- Full-time (12+ credits) Part-time (6-11 credits) Either full-time or part-time

RESIDENCY REQUIREMENTS Choose all that apply.

Students must be a resident of:

County _____ City _____ State _____ Country _____

- Residency is not a requirement.

ACADEMIC REQUIREMENTS Choose one.

- Recipients must have at least a _____ GPA No requirement

STUDENT YEAR Choose one. Freshman (incoming student) Ongoing student No year requirement.

FINANCIAL NEED Choose one answer under each statement.

Student must demonstrate need based on federal criteria per financial aid application process. Yes No

This award is renewable as long as the student continues to meet all of the established criteria. Yes No

Scholarships are awarded by financial aid with institutional committee input according to established donor restrictions.

FUNDING PROCESS

HOW FUNDS ARE TO BE USED

 Check all that apply.

- Award the total amount of the scholarship to the student to cover educational and living expenses.
- Tuition
- Fees
- Books
- Graduation expenses

FUND TYPE

 Choose one.

- One time only (funded by donor(s) for one year)
- Temporarily Restricted/Current Use - Annually recurring (funded by donor(s) every year)
- Permanently Restricted/Endowed (\$25,000 or more is needed to fund corpus to be held in perpetuity through generated income)

Fund must be **endowed** within University policy time limits, 5 years. Fund will not be awarded until fully endowed. Donor will be notified that the fund balance will remain a restricted/current use fund and expended according to the outlined donor intended purposes as outlined in this worksheet. The endowed/permanently restricted fund will cease to exist.

FUNDING SCHEDULE

 Choose one.

- Donor agrees to contribute \$ _____ by _____ (date) **for one year only**.
- Donor agrees to contribute \$ _____ no later than _____ each year to cover the fund distribution for next year.
- Donor agrees to contribute \$ _____ this year to cover the fund distribution for this year.
- Donor agrees to contribute \$ _____ by _____ (date) the first year to **establish the fund**, then \$ _____ per year for _____ years until the fund is **fully endowed/permanently restricted**.

If, in the future, circumstances have so changed that it is no longer feasible, in the opinion of the University, to continue to use the funds as specified in this Donor Designation Form, the University shall be required to apply this fund to such purposes as may, in its opinion, most closely fulfill the intentions herein described. If any provision of this Donor Designation Form is found to conflict with or violate any federal or state law or regulation, then that provision will be modified to bring the language into compliance with the conflicting law or regulation.

BACKGROUND & INTENT

Please use this space to provide a written narrative that tells your story—the “why I/we give!”

AUTHORIZATIONS

I/We grant do not grant permission for Lincoln University to use my/our **name(s)** in promotional material, including news releases.

Please answer each statement below:

I/We grant do not grant permission for Lincoln University to use my/our **gift amount** in promotional material, including news releases.

I/We wish to have my/our names appear as _____

SIGNATURES

Donor Signature(s) _____ Date _____

Donor Signature(s) _____ Date _____

Division of Institutional Advancement Representative Signature

_____ Date _____

Vice President for Institutional Advancement Signature

_____ Date _____

President Signature

_____ Date _____

FOR INTERNAL USE ONLY

Fund Name/Number _____ (Institutional Advancement)

Fund Name/Number _____ (Finance)

Fund Name/Number _____ (Financial Aid)

Fund Name/Number _____ (Communications)

Fund Name/Number _____ (Other _____)