



**Donation Form**

Date: \_\_\_\_\_ NASPA Membership # \_\_\_\_\_  
(if applicable)  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
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**I would like to support the NASPA Foundation with my donation benefiting:**

NASPA Foundation General Fund

**Restricted Funds**

- Melvene D. Hardee Fund *(supports the Dissertation of the Year Award)*
- Zenobia Hikes Scholarship Fund *(provides support for an applicant to attend the Alice Manicur Symposium)*
- James Rhatigan Fund *(supports research on the history of student affairs in the United States)*
- Robert H. Shaffer Fund *(supports a stipend for the tenured faculty member who receives the annual Robert H. Shaffer Award for Academic Excellence as a Graduate Faculty Member)*
- Ruth Strang Award *(recognizes individuals for outstanding contributions to the body of literature concerning women in higher education)*

**Pillars of the Profession – Class of 2012**

- |   |          |  |          |
|---|----------|--|----------|
| <input type="checkbox"/> Marilee Bresciani        | \$ _____ | <input type="checkbox"/> Gage Paine            | \$ _____ |
| <input type="checkbox"/> Linda Clement            | \$ _____ | <input type="checkbox"/> Sandy Scherrens       | \$ _____ |
| <input type="checkbox"/> Mary Coburn              | \$ _____ | <input type="checkbox"/> Ed Spencer            | \$ _____ |
| <input type="checkbox"/> Lyle Gohn                | \$ _____ | <input type="checkbox"/> Brian Sullivan        | \$ _____ |
| <input type="checkbox"/> Enrique Iglesias Hidalgo | \$ _____ | <input type="checkbox"/> Patricia Telles-Irvin | \$ _____ |
| <input type="checkbox"/> Randy Hyman              | \$ _____ | <input type="checkbox"/> Charlotte Tullos      | \$ _____ |
| <input type="checkbox"/> Levester Johnson         | \$ _____ | <input type="checkbox"/> Carol Wiggins         | \$ _____ |

**Single Occasion Gift**

I wish to make a single occasion gift of \$ \_\_\_\_\_

**Giving Levels – Pledge period of up to five years.**

- |   |         |  |          |
|---|---------|--|----------|
| <input type="checkbox"/> Partner            | \$100   | <input type="checkbox"/> Heritage Society    | \$10,000 |
| <input type="checkbox"/> Ambassador         | \$500   | <input type="checkbox"/> Benefactors Society | \$25,000 |
| <input type="checkbox"/> Fellow             | \$1,000 | <input type="checkbox"/> Legacy Society*     |          |
| <input type="checkbox"/> Diamond Club       | \$3,000 |  |          |
| <input type="checkbox"/> President’s Circle | \$5,000 |  |          |

*\*Documented planned gift of \$10,000 or more. We would be pleased to discuss ways that will allow you to enhance the profession that you deeply care about through our planned giving program.*

**Total Donation / Pledge \$ \_\_\_\_\_**

**Payment Options:**

- Enclosed is my check payable to the **NASPA Foundation**.
- Please charge my credit card:  Visa       MasterCard       American Express
- For annual pledges – Please charge my card (check one):*
- Quarterly       Semi-Annually       Annually

Name on Card: \_\_\_\_\_  
Address on Card (if different from above) \_\_\_\_\_  
Account # \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return this form and your gift to: **NASPA Foundation \* 111 K Street, NE, 10<sup>th</sup> Floor \* Washington, DC 20002**