

GIFT FORM

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Do	onor Information	<u>l</u>			
Na	ame:				
Ad	ldress:				
City:			State:	Zip:	
Phone:			Email:	-	
Aft	filiation with UNT	Dallas: 🗆 Alumni	□ Employee □ Parent □	Student 🗆 Friend	
Gi	ft Frequency				
	A single gift of \$	A single gift of \$ is enclosed.			
	I/we pledge a total of $_{___}$. Installments: \Box monthly \Box quarterly \Box annu				
	The first payment of \$ is enclosed.				
Gi	ft Designation	☐ Area of Greate	est Need		
		☐ Presidential So	cholars Endowed Scholarsh	nip Fund	
		□ Remarcus L. V	Vest Memorial Endowed Sc	holarship Fund	
		□ UNT Dallas Co	ollege of Law Scholarship Fu	und	
		□ UNT Dallas Ge	eneral Scholarship Fund		
		☐ Athletics Supp	oort		
		☐ Other			
Ho	onor/Memorial				
	This gift is in honor of:				
	This gift is in memory of:				
Pa	yment Method				
	Check payable to the University of North Texas at Dallas.				
☐ I/we would like to make a credit card payment. Please contact me.				me.	
		Re	turn completed form to:		

University of North Texas at Dallas c/o Office of the President 7300 University Hills Blvd., Room 362 Dallas, TX 75241-4605

Questions? Contact (972) 780-3601 or president@untdallas.edu