



# DONOR WORKSHEET

Thank you for your interest in considering a donation to the *McCook College Foundation*. This worksheet has been designed to assist you in outlining some information about how you would like your donation to be used at *McCook Community College*. Our Director of Administration is available to visit with you at any time to discuss any questions or comments, and will work with you and your representatives to establish all necessary processes. Your generosity supports the Foundation's Mission of promoting and enhancing the educational opportunities at *McCook Community College*, Nebraska's first two-year community college.

(1) How do you wish your gift to be used:

- |   |  |
|---|--|
| <input type="checkbox"/> <b>SCHOLARSHIPS</b>                              | <input type="checkbox"/> <b>CAMPUS ACTIVITIES &amp; PROGRAMS</b> |
| <input type="checkbox"/> Academic   | <input type="checkbox"/> <b>CAMPUS ENHANCEMENTS</b>              |
| <input type="checkbox"/> Based on Need                                    | <input type="checkbox"/> <b>STUDENT ATHLETIC PROGRAMS</b>        |
| <input type="checkbox"/> Tuition Only                                     | <input type="checkbox"/> <b>UNSPECIFIED</b>                      |
| <input type="checkbox"/> Room & Board, Fees,<br>and Books May Be Included | <input type="checkbox"/> <b>OTHER</b> (specify) _____            |

(2) Do you wish the Foundation to use *only the interest* earned from your gift?

- Yes (RESTRICTED)**                       **No (UNRESTRICTED)**

*A "NO" answer directs the Foundation to use the value of your gift toward the purposes indicated above until all proceeds are depleted.*

(3) What name designation would you like the Foundation to use for the award(s) and what are your directions regarding publicity and publication of your gift \_\_\_\_\_  
\_\_\_\_\_

(4) What description would you like used in the MPCC Course Catalog if your gift is designated to be a scholarship award \_\_\_\_\_

(5) What, if any, **special instructions** or **contingencies** would you like to have the Foundation use in the awarding of your gift i.e. academic courses of study, monetary limit on awards, geographic or gender specifics, traditional/non-traditional student, etc \_\_\_\_\_  
\_\_\_\_\_

(6) Please give us your contact information \_\_\_\_\_  
\_\_\_\_\_

(7) How will funds be disbursed to the Foundation? \_\_\_\_\_

**DATE** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_

A copy of the Foundation's 501(c)(3) designation from the Internal Revenue Service is available on this website