

# NMCC Employee Annual Appeal

*Supporting Our Students Through the  
NMCC Foundation*



Name: *(please print)* \_\_\_\_\_

Signature: \_\_\_\_\_

☐ I wish to continue my **Payroll Deduction** gift as currently on file.

☐ I wish to change my current **Payroll Deduction** to the amount of \$\_\_\_\_\_ per pay period.

**YES!** I'd like to join other NMCC colleagues in helping provide NMCC students with opportunities for a quality community college education.

☐ I wish to begin giving through a **Payroll Deduction** of \$\_\_\_\_\_ per pay period beginning with:

☐ the current pay period

☐ a specified date \_\_\_\_\_

☐ I wish to give a **One-Time Gift** of \$\_\_\_\_\_. *Please find check/cash enclosed.*

☐ I have used the online donation option at nmcc.edu.

**I would like my gift to be designated to:**

☐ Area of Greatest Need

☐ General Scholarship Fund

☐ Endowed Scholarship *(please specify)* \_\_\_\_\_

☐ Other \_\_\_\_\_

May we publish your name when acknowledging gifts to the college? ☐ Yes ☐ No

If yes, please indicate the name(s) you would like published: \_\_\_\_\_

Please return the completed form to Kelly Dooner in the Development Office.

***Thank you for supporting NMCC Students!***

FOR OFFICE USE ONLY

cc    HR/Payroll  
Foundation Accountant

Date Submitted: