

# Giving to the USF Asian Student Scholarship

Please print and complete the form below and return with your gift to:

USF Asian Student Scholarship Fund  
4202 East Fowler Avenue, CIS 2031  
Tampa, Florida 33620

Please note: Fields marked with \* are required.

## Gift Designation : Asian Student Scholarship Fund (#391050)

### \*Payment Method:

Check

If you would like to make your gift using your credit card, please complete this section.

\*Card type: (check one)

VISA     Mastercard     AMEX    \*Credit card number: \_\_\_\_\_

\*Name as it appears on credit card: \_\_\_\_\_ \*Expiration Date: \_\_\_\_\_

\*Enter Numeric Address (first set of numbers from the street address) \_\_\_\_\_ \*Billing Zip Code: \_\_\_\_\_

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### Individual Information: EMP# /STUDENT ID/ SSN: \_\_\_\_\_

\*Title: \_\_\_\_\_ \*First name: \_\_\_\_\_ Middle initial: \_\_\_\_\_ \*Last name: \_\_\_\_\_

\*Apt./Suite: \_\_\_\_\_ \*Street: \_\_\_\_\_

\*City: \_\_\_\_\_ \*State: \_\_\_\_\_ \*Zip: \_\_\_\_\_ \*Country: \_\_\_\_\_

\*Home phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_

USF affiliation:  alumnus/a     friend     parent     faculty/staff     current student

If USF alumnus/a, please indicate: Graduation year: \_\_\_\_\_ Name at time of graduation: \_\_\_\_\_

Is your spouse an USF graduate?  Yes     No

(required if yes) Spouse name: \_\_\_\_\_ Spouse graduation year: \_\_\_\_\_ Spouse SSN#: \_\_\_\_\_

\*Gift Amount:  \$1,000     \$500     \$250     \$100     \$50    Other: \_\_\_\_\_

Help us keep your employment information current:

Job title: \_\_\_\_\_

Employer: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Business phone: \_\_\_\_\_ Business E-mail address: \_\_\_\_\_

Would you like to establish a named scholarship? Contact us at 813-974-6846.