

GIFT TO THE NCHU FUND

SECTION I. DONOR INFORMATION

Name (Chinese)	Name (English)
Mailing Address	
Phone	
E-mail Address	
Business Organization	Job Title
Title of Your Receipt	
NCHU alumnus: Degree: _____ Year of degree _____; Department/Institute _____	
If you know the fundraiser, please provide his/her name here. _____	
Agree to publicize the contribution information (name, type of donor, and donate amount)? <input type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION II. DONATION DESCRIPTION

Donation Amount	<input type="checkbox"/> USD\$ _____	<input type="checkbox"/> NTD\$ _____
Please choose the project you would like to support:		
<input type="checkbox"/> Scholarship Fund. (_____ Department/Institute/College)		
<input type="checkbox"/> University Endowment For Academic Faculty, Development and Hardware Construction. (_____ Department/Institute/College)		
<input type="checkbox"/> Unrestricted-open to use for any purpose.		
<input type="checkbox"/> For other special purpose: _____		

SECTION III. DONATION METHOD

<input type="checkbox"/> Check or Money Order	Please make your check payable to National Chung Hsing University. Write the check number No. _____, and mail the check to NCHU. Information: National Chung Hsing University, Alumni Center, 145 Xingda Rd., Taichung 40227, Taiwan
<input type="checkbox"/> Wire Transfer	First Commercial Bank, Taichung Branch, 144 Tsu Yu Road, Sec. 1, Taichung, Taiwan, Account No.: 40130-089950 Account Name: National Chung Hsing University SWIFT CODE: FCBKWTWTP401
<input type="checkbox"/> Credit Card	Issuing Bank : _____ <input type="checkbox"/> VISA <input type="checkbox"/> MASTER <input type="checkbox"/> JCB <input type="checkbox"/> Others _____ Card Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Expiration Date : _____ year _____ month Donation Date : _____ year _____ month <input type="checkbox"/> One-Time Gift <input type="checkbox"/> Periodic Gift (Month/Year) : NCHU will send you the receipt each month. From Date _____ to Date _____, Total _____ (Month/Year) Monthly Donation Amount : _____ Signature _____

Please complete this form and return it to NCHU Alumni Center, or contact us if you have questions:

1. Mailing Address: National Chung Hsing University, Alumni Center, 145 Xingda Rd., Taichung 40227, Taiwan
2. TEL: 886-4-22840249; Fax: 886-4-22854119
3. E-mail Address: alumni@nchu.edu.tw