

GIFT FORM

Individual Donor

Please send the completed form to NUS Development Office.

By mail: Shaw Foundation Alumni House,

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By fax:

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1 MY GIFT WILL SUPPORT + 3 GIFT FREQUENCY 2 MY GIFT (Please tick.) (Please tick one.) (Please tick one.) S\$ NUS Endowment Fund One-time (Please specify.) ☐ Monthly* Other: (Please specify.) +If more than one option is chosen, my gift will be distributed equally between my options. If unspecified or *I authorise the University to continue to deduct my monthly gift from the credit/debit card included in this Singapore tax residents are eligible for a tax deduction 2.5 times the gift value for gifts made in 2020. incomplete, my gift will go towards University-wide form, including any replacement card thereof issued to Scholarships. Singapore tax residents are eligible for a tax me, until written termination is received from me. deduction 2.5 times the gift value for gifts made in 2020. 4 GIFT FULFILMENT (Please tick one.) PLEASE USE CAPITAL LETTERS. ☐ Credit/Debit card (Visa/MasterCard/AMEX): Card No.: Expiry date required if giving via credit/debit card **Expiry Date:** (MM/YY) <u>OR</u> Cheque No: crossed and made out in favour of 'National University of Singapore' <u>OR</u> Payroll (for staff whose primary employer is NUS) NUS Staff No.: 5 MY PARTICULARS (Please fill in ALL fields.) PLEASE USE CAPITAL LETTERS. Title: Prof □ Dr □ Mr ☐ Mrs ☐ Ms Family Name: Given Name: NRIC/FIN: Contact No.: Country: Address: Postal Code: Unit No.: Email Address: I do not wish to be identified as the donor of this gift in NUS publicity materials. Signature of donor / Date: I agree that my gift is subject to NUS' Statutes and Regulations, and to its Standard Terms and Conditions for Gifts (as may be amended from time to time by the University),

PLEASE USE CAPITAL LETTERS.



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