



# Norwalk Student Education Foundation

## Contribution Form

***It's not just a donation. It's an investment in your future.***

Donor Information (please choose donation type) ☐ Individual ☐ Branch ☐ Corporate

Name and Title: \_\_\_\_\_

Organization: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

☐ I wish to remain anonymous

If this contribution is being made in the name of another person, please provide that information here:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone \_\_\_\_\_

☐ Please send an acknowledgment of my contribution to the second address

☐ Please accept this gift of \$\_\_\_\_\_ to the NSEF

☐ Please accept this pledge of \$\_\_\_\_\_ to be paid \$\_\_\_\_\_ each year for\_\_\_\_ years

☐ This gift is a memorial ☐ Please contact me regarding a donation to NSEF

Please use this gift or pledge for the: (choose one)

☐ General Fund ☐ Endowment Fund (only the income/interest is used)

As a donor, you may recommend how the dollars should be used. If you wish to recommend the specific use of the contributed funds, please specify below. Attach additional sheets if necessary.

\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Please mail your check and completed form to: **Norwalk Student Education Foundation**  
**P.O. Box 310**  
**Norwalk, Iowa 50211**

### ***Does your employer have a matching gift program?***

Attach your form with this donation, or fill out the contact information below:

Employee Name: \_\_\_\_\_ Employer: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone or E-mail: \_\_\_\_\_

*An independent community organization dedicated to provide resources to enhance educational experiences and opportunities for the students in the Norwalk Schools*  
[www.norwalkstudentfoundation.org](http://www.norwalkstudentfoundation.org)