

Request New Foundation/Scholarship Fund

Fund Name:						
College/Unit:	Department:					
Donor Full Name:						
Fund Purpose:						
Fund Description:						
Copies of Fund Reports to Daniel Additional Recipients of Report:	onor:	YES		NO		
Banner UID: U			Banner UID:	U		
Name:			Name:			
Authorized Signatures for Ex						
Departmental Contacts:						
Email:	@memphis.edu	Name:			Title: <u>Director of Devel</u>	opment
Email:	@memphis.edu	Name:			Title:	
Email:	@memphis.edu	Name:			Title:	
Fund Type:	End	owment	Curren	t Expendable		
Fund Agreement Received	YES		NO			
Has Money Been Received?	YES	, Amount _		NO		

Waiver Information (if applicable):

Funding received does not satisfy Foundation policy of a \$2,000 minimum for current expendable funds and \$30,000 minimum (including pledges representing and unconditional promise to pay) for endowment funds.

Other Foundation policy criteria not met (please specify):