Nar OUNDATION	ne:	Title:	Dr.	Mr.	Mrs.	Ms.
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A Number:	Departn	nent:				Office Number:
Phone Number:		_ Email Addre	ess:			
Recurring Gift Amount: I am a proud NSCC A I would like to remain	lum!	\$50 \$100	Other: \$_	Per	Month	One Time Gift: \$
I would like to help th	ne foundation su	• •	•	•		pact Fund. ther initiative.

__ I am interested in leaving a legacy and would like more information about how to include NSCCF in my will or trust.

Donor Signature: _____ Date_____

Scholarships and Initiatives:

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Jacuther Memorial Culinary Arts Scholarships
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Piedmont Natural Gas Scholarship
Randy Rayburn Culinary Arts Scholarship
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Ted M. Washington Endowed Memorial Scholarship

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Beyond Financial Aid

Campus Cupboard
Child Care Assistance
Helping Hand Fund
Textbook Assistance
Transportation Assistance

Thank you for your continued support of the NSCC Foundation!

Nashville State Community College Foundation 120 White Bridge Road, Mailbox 32, Nashville, TN 37209

Please make checks payable to NSCC Foundation and return to the Foundation Office or to the address above.

Recurring gifts will be deducted each payroll period at this amount until donor specifies that the gift amount be amended or the gift canceled.

Please note all undesignated gifts will default to the Foundation's Impact Fund which supports NSCC students' greatest needs.

NSCCF is a 501(c)(3) nonprofit organization. All gifts are tax deductible as allowed by law.

Questions? Contact us 615.353.3222 foundation@nscc.edu nsccf.org