



FLORIDA ATLANTIC UNIVERSITY

Kelly/Strul  
Emerging Scholars

Name(s) \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

GIFT INFORMATION

	Total for 4 Years	Per Year		
<input type="checkbox"/> One Student:	\$64,000	\$16,000	<input type="checkbox"/> annually	<input type="checkbox"/> biannually
<input type="checkbox"/> Two Students:	\$128,000	\$32,000	<input type="checkbox"/> annually	<input type="checkbox"/> biannually
<input type="checkbox"/> Four Students:	\$256,000	\$64,000	<input type="checkbox"/> annually	<input type="checkbox"/> biannually
<input type="checkbox"/> Six Students:	\$384,000	\$96,000	<input type="checkbox"/> annually	<input type="checkbox"/> biannually
<input type="checkbox"/> Eight Students:	\$512,000	\$128,000	<input type="checkbox"/> annually	<input type="checkbox"/> biannually
<input type="checkbox"/> Ten Students:	\$640,000	\$160,000	<input type="checkbox"/> annually	<input type="checkbox"/> biannually
<input type="checkbox"/> Twenty Students:	\$1,280,000	\$320,000	<input type="checkbox"/> annually	<input type="checkbox"/> biannually
<input type="checkbox"/> Other: _____			<input type="checkbox"/> annually	<input type="checkbox"/> biannually

DONATIONS BY CHECK

The first payment will begin on \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (For your convenience, automatic reminders will be sent.)

I (we) plan to make this contribution in the form of: ☐ check ☐ other: \_\_\_\_\_

If paying by check, please make it payable to **FAU Foundation** with **Kelly/Strul Emerging Scholars Program** in the memo line and send to FAU as outlined below. If paying through a bank or advisor, please ensure your name is noted on the document.

ONLINE DONATIONS

To make a donation online, please visit [www.fauf.fau.edu/give](http://www.fauf.fau.edu/give)

ACKNOWLEDGMENT INFORMATION

Please use the following name(s) exactly as indicated on all acknowledgments & publications:

Name(s): \_\_\_\_\_

☐ I (we) wish to have our gift remain anonymous.

If you have any questions, please contact Keven Allen, Jr., Ph.D., at 561-297-2364 or [kallenjr@fau.edu](mailto:kallenjr@fau.edu).

Donor Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

FAUF CEO Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

PLEASE SEND THIS FORM TO:

Florida Atlantic University, Attn: Keven Allen, Jr., Ph.D. - Kelly/Strul Emerging Scholars Program,  
Division of Institutional Advancement, AD10, Rm. 247, 777 Glades Rd., Boca Raton, FL 33431

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Raiser's Edge ID: \_\_\_\_\_ Fund #: \_\_\_\_\_ Dev. Officer: \_\_\_\_\_ Rev. 03.07.24