



BRIDGEWATER

STATE UNIVERSITY

THE BRIDGEWATER FUND

FY24 Employee Giving Campaign

Payroll Deduction (Direct Deposit) Authorization Form

Bridgewater State University (BSU) employees may donate to the BSU Foundation through payroll direct deposit. Your pledged amount will be deducted from each bi-weekly paycheck.

- A **\$10** pledge (*just 72¢ per day*) provides a student struggling to make ends meet with \$260.
- A **\$20** pledge (*just \$1.43 per day*) gives a student over \$500 to put towards buying books for a semester.
- Become a leadership donor with a gift of \$1,000. Pledge **\$38.50** per pay period (*just \$2.75 a day!*) and you could be the difference between a student staying in school or dropping out due to financial troubles.

Employee Information

Name _____ Employee ID _____

Home Address _____

Email _____ Phone _____

University Division and Department _____

Payment Information

Yes, I would like to contribute to the employee giving campaign through bi-weekly payroll deduction.

Please deduct \$ _____ per pay period.

Please designate my gift to:

- | | |
|---|---|
| <input type="checkbox"/> The Bridgewater Fund
(University's greatest needs) | <input type="checkbox"/> College of Graduate Studies Greatest Needs |
| <input type="checkbox"/> Ricciardi College of Business Greatest Needs | <input type="checkbox"/> College of Humanities & Social Sciences Greatest Needs |
| <input type="checkbox"/> College of Continuing Studies Greatest Needs | <input type="checkbox"/> Bartlett College of Science & Mathematics Greatest Needs |
| <input type="checkbox"/> College of Education & Health Sciences
Greatest Needs | <input type="checkbox"/> School of Social Work Better Together Fund |
| | <input type="checkbox"/> Other _____ |

My gift is in honor/ memory of: _____

Please indicate if you have included BSU in your estate plans: Yes No Send information

You may also contribute through check (made payable to **BSU Foundation**) or online: **bridgew.edu/give**

I hereby authorize Bridgewater State University (BSU) through the State Treasurer, to deposit my net pay and/or distribution to the financial institution listed above. My employer, through the State Treasurer is also authorized to debit any over deposit or error which is caused to be made to my account. The State Treasurer or the employee may cancel this authorization at any time with proper notice to the office of Alumni and Development. This agreement will remain in effect until BSU receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to the Payroll Department.

Employee signature

Date signed

For Advancement Services and Payroll Office use only

FY24EGDM-PER

Reviewed by AS _____

(initial and date)