



RHODE ISLAND SCHOOL OF DESIGN  
**DIVISION OF INSTITUTIONAL ENGAGEMENT**  
Two College Street / Providence, RI 02903 / USA

**PAYROLL DEDUCTION**

Thank you for investing in Rhode Island School of Design.

Please apply my gift to:

- ☐ Immediate Needs and Priorities
- ☐ Tools for Teaching and Learning
- ☐ Student Financial Aid
- ☐ RISD Museum
- ☐ Social Justice and Equity

NAME *please print*

CAMPUS ADDRESS

CAMPUS PHONE

HOME PHONE

SIGNATURE

DATE

**PAYROLL DEDUCTION AUTHORIZATION**

- ☐ Yes, I authorize the Payroll Office to deduct the following amount from my wages for the RISD Faculty and Staff Campaign.

My monthly/biweekly deduction will be  
(*please check one*):

- ☐ \$100
- ☐ \$50
- ☐ \$35
- ☐ \$25
- ☐ \$10
- ☐ \$5
- ☐ Other \$ \_\_\_\_\_

**PLEASE CHECK ONE**

- ☐ Please maintain this deduction until otherwise instructed.

**OR**

- ☐ Total gift of \$ \_\_\_\_\_ paid over \_\_\_\_\_ pay periods.

Start date \_\_\_\_/\_\_\_\_/\_\_\_\_

End date \_\_\_\_/\_\_\_\_/\_\_\_\_

Employee signature \_\_\_\_\_

Employee ID number \_\_\_\_\_

Today's Date \_\_\_\_\_

*You are welcome to alter this commitment at any time.*

- ☐ I have already included RISD in my will.
- ☐ I would like to learn more about ways to include RISD in my will.

**PLEASE RETURN THIS FORM TO:**

Division of Institutional Engagement  
Rhode Island School of Design  
Two College Street  
Providence, RI 02903-2784

All gifts are tax-deductible as provided by law. RISD's fiscal year runs July 1–June 30.

Questions? Please contact the RISD Fund at 401 454-4483 or [annualfund@risd.edu](mailto:annualfund@risd.edu)