

WORKPLACE GIVING FORM

INSTRUCTIONS:

Please print then complete this form and forward to Gift Services - UQ Advancement, JD Story Building, Level 7, The University of Queensland 4072

PLEASE SELECT ONE OF THE FOLLOWING:					
	Commence deduction		Change deduction		Cease deduction
PERSONAL INFORMATION					
Title	·	Full r	ame:		
Employee number:		Organisational unit:			
Work phone:		Email:			
WORKPLACE GIVING OPTIONS					
All deductions will commence from the next available pay after receipt of this form. All deductions must be specified as fortnightly amounts. You may select as many areas as you wish below.					
The University of Queensland					Fortnightly deduction:
	Scholarship Endowment			Ŧ	
☐ Õ¦^æe^•o∕heeds					
Research priorities					
The UQ Art Museum					
	The UQ Library			\$´´	
	The area of your choice (please sp	ecify):		\$´´	
For a full list of areas you may wish to donate to please visit www.uq.edu.au/giving/					
When you make a gift to UQ you not only help to sustain critical programs and research, you also help provide an education and scholarships for students who may otherwise not be able to study due to financial barriers.					
Gifts towards research performed at UQ leads to advances in human health, building sustainable communities, and creating solutions for a healthy planet. So giving to the University has a positive impact within our Queensland borders and globally. Thank you.					

Your details will be forwarded to the Advancement Office, who will keep you informed of the impact and outcomes of your donations to The University of Queensland.

If you would not like your gift to The University of Queensland to be publicly acknowledged, please email UQ Advancement at donations@uq.edu.au

APPROVAL AND DECLARATION

I authorise The University of Queensland to implement the Workplace Giving arrangements stated above, from the next available pay and until further notice. I understand the Workplace Giving deductions will be made from my pre-tax pay, so that I will receive the tax benefit immediately. I acknowledge that small fortnightly deductions may not have an impact on my fortnightly tax withheld. I understand that once a deduction has been made it cannot be recovered. I acknowledge that donations made under this arrangement are made voluntarily and unconditionally and I will not benefit from the donation other than the benefit of the deduction itself.

Signature of Employee: _

Date (dd/mm/yyyy): _____

The information on this form is collected for the purpose of implementing your workplace giving arrangements. The University may also use the information to keep you informed about other promotions/fundraising events. The information you provide will not be disclosed to a third party without your consent, unless disclosure is authorised or required by law. For further information please consult the UQ Privacy Management Policy at: http://www.uq.edu.au/hupp/index.html?page=24999.

For Workplace Giving Program enquiries, please contact Gift Services on 07 3346 3900 or email donations@uq.edu.au