



DONATION/SPONSORSHIP FORM

Date:		Prepared By:	
Dept./School:		Amount:	

NOTE: The following contact information is **mandatory**.

Donor's Full Name and Address			
Individual	Corporation	Sponsor	Gift
*If the donor is a corporation or an organization, please provide the following details:			
Contact's full name:			
Contact's title:			
Email:		Phone:	

Account Name:	
Worktag:	
Account no.:	
Deposit Date:	

CC: Development Coordinator
Applied Science, Development Office
team.sponsorship@apsc.ubc.ca

Notes: