

Donation Form

Thank you for your donation to the University of Macau. Please complete and return this form to:

Alumni and Development Office, Room 2021, Administration Building (N6), University of Macau, University Avenue, Taipa, Macau, China Tel: +853 8822 4245 Fax: +853 8822 2316

Email: donation@umac.mo

*Rec	uired	inform	nation
------	-------	--------	--------

Donor Information					
*Salutation: Mr Mrs Ms Dr Prof Others					
*Name in English: (Surname) (Other name/s)					
Name in Chinese:					
*Donor is a Alumnus/Alumna (no.) Graduation Year: Department /Major: Staff (no.) Student (no.) Hon. Doc Others					
☐ This donation is on behalf of (tick if applicable)					
☐ I prefer to make this donation anonymously. (tick if applicable)					
Correspondence Organisation Name (if applicable):					
Contact Person: Position (if applicable):					
*Telephone: Fax: Email:					
*Address:					
Donation Information					
*Amount: *Currency: □ HKD □ MOP □ RMB □ Other:					
*Please allocate my donation to:					
☐ General Purposes (with no specification on projects or faculties)					
□ Support Students / Scholarships (<i>Please specify</i>):					
□ College, Faculty, Department, Centre/Unit (<i>Please specify</i>):					

Note: Acceptance of any donation is subject to the approval of the University of Macau.

☐ Others (Please specify): _

Donation Type				
□ One-off Donation □ Regul	ar Donation			
(For Regular Donation) ☐ I would like to make a (monthly of an amount of (currency for instalments via the following payments should there be any modification regarding the regular donation.	:) starting on nt method.	(<i>MM/</i> YYYY)		
advance through email or letter.				
Payment Method				
□ Cash □ Crossed Cheque payable to "University of Maca □ Others (<i>Please specify</i>):				
Personal Data Collection Statement				
 The University of Macau (UM) being a public the purposes of donation, communication and donor to fill in this donation form. The personal data collected through this don communication and providing related administ Personal data collected will not be transferred may be transferred to authorized entities for reprosecution of criminal offenses. The donor is entitled to the right of accessing accord to the law. But such rights shall be exsubmit to the Alumni and Development Office 	d providing the related administration form shall only be used rative services. In the date of the date of the protection of public particles and updating the serviced through a written requestion.	If for the purpose of donation, your consent. Personal data blic interests, investigation and e data provided in the form in		
*Donor's Signature:	*Date:	(DD/MM/YYYY)		
For Official Use Only				
Form Submitted by				
Name of Staff Member:	Department:	Extension:		
Department/Unit Head's Endorsement: Date of Endorsement: (DD/MM/YYYY) Receipt To				
(Should the receipt be sent to another staff member other				
Name of Staff Member:	Department:	_ Extension:		
Approval for the Acceptance of Donation				
Approver's Signature		oval (<i>DD/MM/</i> YYYY)		