



澳門大學發展基金會
UNIVERSITY OF MACAU
DEVELOPMENT FOUNDATION

Donation Form

Thank you for your donation to the UMDF. Please complete and return this form to:

University of Macau Development Foundation,
Room 6005, Administration Building,
University of Macau, N6
Avenida da Universidade, Taipa, Macau, China
Tel: +853 2883 0449 Fax: +853 2851 6402 Email: info@umdf.org.mo

For Official Use

Receipt No. : _____

Date of receipt issued: _____

Donation Information

☐ I ☐ Our Organization would like to donate the sum of MOP _____ (if in other currency, please specify)

In support of the following items:

- ☐ Support Students ☐ Promote Teaching Excellence ☐ Campus Development
- ☐ Fund Research Activities ☐ Faculty/ College
- ☐ Others (please specify) : _____

Payment Method

- ☐ Cash
- ☐ Crossed Cheque payable to "University of Macau Development Foundation"
- ☐ Bank-in
Name of party to be credited : **University of Macau Development Foundation**
Bank Name : **Bank of China, Macau Branch** Swift Code : **BKCHMOMX**
Account Number to be credited: (MOP) **180101208227779** (HKD) **180111238756226** (USD) **180188101048818**

Donor/ Organization Information

- ☐ In Name of Individual (Mr/Mrs/Ms/Dr/Prof) Name in Chinese : _____
Name in English: (Surname) _____ (Other name/s) : _____
- ☐ In Name of Organization Organization Name: _____

Correspondence

Contact Person : _____ Telephone : _____ Fax : _____
Email : _____
Address : _____

*Note: Donor is a (if applicable) : ☐ Alumnus/ Alumna ☐ Staff ☐ Student

Declaration

Personal Data Collection Statement

- The personal data collected through this donation form shall only be used for the purpose of donation, communication and providing related administrative services.
- Personal data collected will not be transferred to other institutions without your consent. Personal data may be transferred to authorized entities for reasons of the protection of public interests, investigation and prosecution of criminal offenses.
- The donor is entitled to the right of accessing, rectifying, and updating the data provided in the form in accord to the law. But such rights shall be exercised through a written request (by e-mail, fax, or letter) submit to the University of Macau Development Foundation.

I understand that the information will be used to facilitate the donation to University of Macau Development Foundation only

Donor's Signature : _____ Date : _____ (DD/MM/YYYY)



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UNIVERSITY OF MACAU
DEVELOPMENT FOUNDATION

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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 than who submit this form, please fill in the following.

Name of Staff Member : _____ Department : _____ Extension : _____

Approval for the Acceptance of Donation

Approver's Signature

Date of Approval (DD/MM/YYYY)