



# Donation Form

For Official Use
Receipt no. : _____
Date of receipt issued: _____

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

University of Macau Development Foundation,  
Room 6004, Administration Building  
University of Macau, N6  
Avenida da Universidade, Taipa, Macau, China  
Tel: +853 2883 0449 Fax: +853 8822 2333

Donor Information	
Salutation:	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr <input type="checkbox"/> Prof <input type="checkbox"/> Others _____
Name in English: (Surname)	_____ (Other name/s) _____
Name in Chinese:	_____
Donor is a	<input type="checkbox"/> Alumnus/Alumna (no. _____) Graduation Year: _____ Department/Major: _____
	<input type="checkbox"/> Staff (no. _____)
	<input type="checkbox"/> Student (no. _____)
	<input type="checkbox"/> Honorary Doctorate
	<input type="checkbox"/> Others _____
<input type="checkbox"/>	This donation is on behalf of _____ .(tick if applicable)
<input type="checkbox"/>	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: <input type="checkbox"/> HKD <input type="checkbox"/> MOP <input type="checkbox"/> RMB <input type="checkbox"/> Other: _____
Please allocate my donation to :	
<input type="checkbox"/>	Designated Endowment*
<input type="checkbox"/>	General Endowment*
<input type="checkbox"/>	Designated Fund
Designated Use (For designated endowment / designated fund only):	
Support Students	
<input type="checkbox"/>	Scholarships, Bursaries & Fellowships
<input type="checkbox"/>	Student Exchange Programs
<input type="checkbox"/>	Student Activities
Promote Teaching Excellence	
<input type="checkbox"/>	Educational Programs
<input type="checkbox"/>	Distinguished Scholar's Lectures
Campus Development	
<input type="checkbox"/>	Campus Buildings and Facilities
<input type="checkbox"/>	Library Books / Periodicals
Fund Research Activities	
Research Projects(please specify ) : _____	
Giving to College, Faculty, Department, Center / Unit	
<input type="checkbox"/>	College, Faculty, Department or Center / Unit (please specify ) : _____
<input type="checkbox"/>	Others (please specify ) : _____

\*Note: For endowment, UMDF will preserve its capital. The accumulated interest and investment income generated will be used for designated purposes or for UM's general development.

**Donation Type**

One-off Donation                       Regular Donation

(For Regular Donation)

I would like to make a \_\_\_\_\_ (monthly/quarterly/annual) donation to the University of Macau Development Foundation of an amount of \_\_\_\_\_ (currency: \_\_\_\_\_) starting on \_\_\_\_\_ (MM/YYYY) for \_\_\_\_\_ instalments via the following payment method.

Should there be any modification regarding the regular donation, please inform [UMDF](#) 30 days in advance through contacts at top of the front page.

**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) 01-01-20-822777      (HKD) 01-11-23-875622

**Declaration**

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)

**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 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)