

# Gift/Pledge Form

## Connecticut Talent Assistance Cooperative, Inc.

The mission of the EOC is to facilitate the entry and/or re-entry of eligible Connecticut residents into postsecondary educational programs. Specific program activities include:

- client educational assessments
- career and academic counseling and guidance
- college tutorial services
- collection and dissemination of financial aid information

### Donor Information (please print or type)

|                      |  |
|----------------------|--|
| Name                 |  |
| Billing address      |  |
| City                 |  |
| State                |  |
| ZIP Code             |  |
| Telephone (home)     |  |
| Telephone (business) |  |
| Fax                  |  |
| E-Mail               |  |

### Gift/Pledge Information

I (we) pledge a total of \$ \_\_\_\_\_ to be paid:  
\_\_\_\_\_ now \_\_\_\_\_ monthly \_\_\_\_\_ quarterly \_\_\_\_\_ yearly.

I (we) plan to make this contribution in the form of:  
\_\_\_\_\_ cash \_\_\_\_\_ check

Gift will be matched by \_\_\_\_\_ (company/family/foundation).  
\_\_\_\_\_ form enclosed \_\_\_\_\_ form will be forwarded

### Acknowledgement Information

Please use the following name(s) in all acknowledgements:

|  |
|--|
|  |
|--|

\_\_\_\_\_ I (we) wish to have our gift remain anonymous.

|              |
|--------------|
| Signature(s) |
| Date         |

Please make checks, corporate matches, or other gifts payable to:

CONNTAC, Inc.  
35 Pleasant Street  
Unit 1-C  
Meriden, CT 06450