



Dear Trustees,

As Ilisagvik College continues to diversify our funding sources, it is imperative that we show donors and contributors that we have 100% board support via individual financial contributions from each Board Member. Your annual leadership contribution represents your personal commitment to the College and that you value Ilisagvik as an important institution to financially contribute to.

Annual leadership contributions from our Board Members encourages additional funders to consider investing in our mission and programs as we continue to deliver and grow higher education opportunities for our people and our communities.

Our 2022 annual giving goal is \$11,000 (Eleven Thousand Dollars) from you as Trustees. This amount equals \$1,000.00 (One Thousand Dollars) per Board Member.

Your contribution to Ilisagvik can be made in payments deducted from your honorarium checks in an amount you choose.

As example: \$250.00 (Two Hundred and Fifty Dollars) deducted from 4 honorarium checks meets an individual annual contribution goal of \$1,000.00.

Contribution amounts may also be made as a one-time payment or on a monthly, quarterly, bi-annual, or annual payment schedule.

Contributions may be given by cash, personal check, credit card and by phone at 907.852.1772. If you prefer to contribute online, you can do so at: <https://www.ilisagvik.edu/give/>

If your contribution has a special purpose, please let us know re; in memory of, in honor of, etc. If you wish, we are happy to send a gift announcement. Please provide mailing or email address.

Please join your chair in supporting the College and all that it does for the North Slope.

Quyanapqak,

A handwritten signature in black ink, appearing to be 'Quyanapqak', written over a white background.

Chair, Board of Trustees



## Board of Trustee Giving Form

This authorization:

- INITIATES** my automatic gift support through honorarium check deduction
- CHANGES** the current amount of my honorarium check deduction gift
- TERMINATES** my honorarium deduction gift support

Trustee Name: \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Spouse/Partner (recognition purposes): \_\_\_\_\_

- I prefer to remain anonymous
- My donation has a special purpose  In memory of \_\_\_\_\_  
 In honor of \_\_\_\_\_

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**Option 1: Continual Honorarium Check Deduction**

Amount to deduct from each honorarium check in increments of: \$ \_\_\_\_\_ or \_\_\_\_\_% of my net honorarium for each meeting date to begin: \_\_\_\_\_ continuing for the duration of my time as a Trustee, unless otherwise noted.

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**Option 2: One-Time Donation**

Amount to deduct from honorarium check: \$ \_\_\_\_\_

Board of Trustee Meeting Date: \_\_\_\_\_

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**Option 3: Donation Amount Enclosed**  monthly  weekly  quarterly  annually

Card # \_\_\_\_\_ Expiration MM/YY \_\_\_\_\_ CVC \_\_\_\_\_

Check (send check to PO BOX 749, Barrow AK 99723 Attn: Institutional Advancement)

Cash  Online (<https://www.ilisagvik.edu/give/>)

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**Please designate my contribution to the following:**

- General Support  Program Specific: \_\_\_\_\_
- Ilisagvik College Foundation  Employee Scholarship  Capital Campaign

I hereby authorize a deduction in the amount shown above to be withheld from my honorarium check(s). This authorization will remain in effect until terminated by written notice to the Business Office.

\_\_\_\_\_  
**Board of Trustee Signature**

\_\_\_\_\_  
**Date**

**Please complete and return this form to:**

Ilisagvik College | Business Department | PO BOX 749 | Utqiagvik (Barrow), Alaska 99723 | (907) 852.3333 | [serena.nesteby@ilisagvik.edu](mailto:serena.nesteby@ilisagvik.edu)