



**Thank you for your intent to include Caldwell University in your legacy plans.
The St. Catherine of Siena Circle is reserved exclusively for donors like you.
Simply complete this form and be counted among this special group.**

Please complete and return this form, and consider enclosing a copy of the relevant provision of your will or trust. Please know that we will honor and respect the information you share and keep it **absolutely confidential** in your donor record. Please continue to notify Caldwell as you make changes to your legacy gift plans.

Tell us about your Legacy Gift

My bequest will be: (Please complete all that apply based on current value)

- () A percentage of my estate: _____%
- () A specific dollar amount: \$ _____
- () The residue of my estate: _____
- () A specific item of value: _____
- () Life insurance: Face Value: \$ _____
- () Retirement plan proceeds: \$ _____

The approximate value of my/our legacy gift is anticipated to be:
\$ _____

Tell us how you'd like your Legacy Gift to be used

- () My/our bequest is unrestricted. The University may use my/our Legacy Gift how it chooses.
- () Please use my/our Legacy Gift by used for the following specific purpose:

Share some vital information with us

Name/class year: _____

Date of birth: _____

Spouse's name: _____

Date of birth: _____

Mailing address:

Best Phone: _____

Best E-mail: _____

Recognize me/us as: _____

(i.e. Mrs. Mary Smith '67)

Tell us how to recognize you

() I would like to be publicly acknowledged as a member of the Saint Catherine of Siena Circle, and receive appropriate invitations, recognition, etc.

() I prefer to remain anonymous and request no acknowledgement, invitations, recognition, etc.

Signature: _____ Date: _____

Signature: _____ Date: _____

Please return completed form and related documentation to:

Office of Philanthropy and Engagement
Caldwell University
120 Bloomfield Ave.
Caldwell, NJ 07006