



GIFT ACCEPTANCE FORM

To be completed by staff

DONOR INFORMATION

NAME OF DONOR: _____
(Circle one) **Faculty** **Staff** **Student** **Public**

ADDRESS: _____

City: _____ **State:** _____ **Zip:** _____

HOME/OFFICE PHONE NUMBER: _____ **CELL:** _____

DATE RECEIVED: _____

DESCRIPTION OF ITEMS (Circle one):
 Books **Text Books** **Videotapes** **DVDs** **CDs**

QUANTITY: _____

SPECIAL INSTRUCTIONS BY DONOR:

RECEIVER'S NAME: _____

JOB TITLE: _____

NOTE: Forward the items and Acceptance Form to the designated staff for acknowledgment.