

**UNCP Office of Advancement**  
Mailing List and Gift Report Request Form

*Please allow up to ten business days per request. Please save as a new file and email to  
[bryan.partner@uncp.edu](mailto:bryan.partner@uncp.edu).*

Report Name: \_\_\_\_\_  
Person making request: \_\_\_\_\_ Title: \_\_\_\_\_  
Department/School: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Purpose:** Mailing/Invitation List      Gift Report      Other (please specify) \_\_\_\_\_

**Brief explanation of request:**

*Example: A mailing list of alumni who graduated with a degree in nursing OR a gift report for individuals that gave more than \$100 this fiscal year to wrestling*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**GENERAL CRITERIA**

**Constituent Type**      Alumni      Friends      Faculty/Staff  
Board \_\_\_\_\_      Other \_\_\_\_\_

**Include**      Individuals Only      Organizations Only      Individuals and Organizations

**Exclude (please check all that should be excluded)**

No Valid Address      Do Not Mail      Do Not Phone      Do Not Email  
No Contact      No Alumni Communications

**Gift Date Range (for gift reports only)**      From: \_\_\_\_\_      To: \_\_\_\_\_

**Gift Types to Include**      One-time gifts (cash, stock, etc.)      Pledges      Gifts in-kind  
Recurring Gift Payments      Pledge Payments

**OUTPUT FIELDS**

<u>Constituent Information</u>	<u>Gift Information</u>	<u>Alumni Information</u>
Name	Gift Date	Class Year
Primary Addressee/Salutation	Gift Amount	Degree
Primary Mailing Address	Gift Designation	Major
Primary Phone		College/Department
Primary Email		Sports Participation
Employment Information		Fraternity/Sorority

*Advancement Services releases information regarding constituents to official University academic/administrative units. Such confidential information is to be used for official University purposes only. By signing this form, I certify that the above request is for an officially recognized University program or activity and will be used only once. All versions of this data, both electronic and paper, will be destroyed within 30 days of use. Furthermore, mailing labels cannot be distributed or used by outside commercial concerns or firms. I understand and assume full responsibility for the receipt and proper use of this confidential information.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_