The Phoenix Regional Campaign Committee challenges the Washington University communities in Phoenix and Tucson to step forward and set an example for the rest of the nation. By establishing 10 new annual scholarships as part of Leading Together: The Campaign for Washington University, we can help ensure that every admitted student—regardless of their financial circumstances—can enjoy the opportunity to study at Washington University.

A Statewide Dedication to Scholarships
Scholarships make it possible for almost half of our undergraduates to attend the university. Our Arizona alumni, parents, and friends are making annual scholarships a top priority, as every dollar donated for scholarship support directly impacts our students. Annual scholarships provide student support almost immediately—at the beginning of the next academic year.

Arizona Challenge Scholarships can be designated with a preference for students from Arizona, students in a particular school, or left open to provide support wherever the need is greatest. We have a ready source of bright students eligible for an Arizona Challenge Scholarship.

To make your gift, please contact:
Jason W. Roland, Regional Director of Development
Washington University in St. Louis
Campus Box 1228
One Brookings Drive
St. Louis, MO 63130-4899
314.935.2958
jwroland@wustl.edu

“For our Arizona community of alumni, parents, and friends is proud to support Washington University students through the Arizona Scholarship Challenge. Scholarships created through this challenge will publicly demonstrate our region’s commitment to students who seek to follow in our footsteps.”

Robert Nagle, BU84
Phoenix Regional Cabinet Chair and Phoenix Regional Campaign Committee Chair
I/We pledge the sum of $______________ to provide an Annual Scholarship to be known as the ______________________________________________________________________ Arizona Challenge Scholarship.

(Provide exact name)

This gift will be funded as follows:

☐ Current fiscal year gift (July 1–June 30) to be made on _________________ (Date).
☐ Multi-year pledge (excluding any matching funds) to be paid over ___ years beginning ________________

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☐ My/Our outright gift is as follows: ☐ Cash ☐ Securities ☐ Credit Card: ☐ AmEx ☐ Discover ☐ MasterCard ☐ Visa

Name as it appears on card: __________________________________________________________

Card number: __________________________________ Exp. date: _______________________

Signature: __________________________________________ Date: _______________________

☐ Matching gifts will be provided by the following company/companies: __________________________

☐ Matching gift form(s) attached ☐ Form(s) to be obtained from my/our employer(s). Match will count toward my/our total gift.

☐ I/We intend to recommend a gift* via: ☐ a donor-advised fund ☐ a family foundation

Name of fund or foundation: __________________________________________________________

*If your gift or pledge will be paid from a donor-advised fund or private foundation, your gift will be an “intention” and not a legally binding pledge.

☐ For recognition purposes, the donor(s) should be listed in honor rolls or other publications as follows: __________________________________________________________

☐ I/We prefer to be listed as anonymous in honor roll listings.

This scholarship is designated for use by: ☐ the university ☐ the following school(s): __________________________________________________________

I/We have the following preference for selection: ☐ need ☐ merit ☐ either

I/We have the following preference for selection: ☐ student from Arizona ☐ any student

This scholarship is designated for use by: ☐ undergraduate students ☐ graduate students ☐ either

I/We are making this gift ☐ in memory of / ☐ in honor of: __________________________________________________________

Please send a separate acknowledgment of this gift to: __________________________________________________________

It is Washington University’s policy to provide pledge reminders to the donor(s). Please indicate below whether you would like to receive them.

☐ I/We would like to receive pledge reminders ☐ I/We prefer not to receive pledge reminders.

Please send annual updates about my/our scholarship to: __________________________________________________________

I/We understand that should the university be unable to award the scholarship as outlined above, the scholarship will be awarded in keeping as closely as possible to my/our preferences.

I/We understand that Washington University is relying on this commitment to provide financial support to students. Any amount not paid toward this pledge during my/our lifetime(s) will be a legally binding obligation of my/our estate.

Name(s) (Print) __________________________________________

Signature(s) __________________________________________ Date _______________________

Address

City/state/zip Phone Email

University representative signature (Print) __________________________________________ Date _______________________