

MIHS MATCHING GRANTS TO UNIVERSITIES PROGRAM

Program Purpose

Through its Matching Grants to Universities Program, the Michigan Industrial Hygiene Society (MIHS) encourages individual financial support of higher education to institutions that have performed valuable service to both the member and the community.

Eligible Contributors

All current individual members (including Honorary, Life, Full, Associate, and Student) may have their gifts matched by MIHS to eligible institutions. Note: Contributors are not required to have attended or received a degree from the eligible institutions.

Eligible Institutions

Graduate and undergraduate schools with industrial hygiene programs, which are in the boundaries of MIHS, are eligible to receive matching grants. The following is a list of eligible institutions, along with addresses to which donations should be sent. Your check should be made out to the school or institution.

Oakland University
Industrial Health and Safety Program
School of Health Sciences
Hannah Hall
Rochester, MI 48309-4401

University of Michigan
School of Public Health
Office of Development and External Relations
109 Observatory St.
Ann Arbor, MI 48109-2029

Wayne State University
Eugene Applebaum College of Pharmacy and Health Sciences: Dept. of Fundamental & Applied Sciences / Occupational & Environmental Health Sciences, Suite 5190
259 Mack Avenue
Detroit, MI 48201-2417

Eligible Gifts

The minimum gift matched by MIHS is \$25, and the maximum amount matched is \$200 for each contributor. Gifts will be matched at the rate of \$1 for each \$1 contributed up to \$200. In the case of multiple gifts made by an eligible individual, MIHS applies the match to the gifts in the order received. The maximum amount matched per eligible institution is \$1250.

What MIHS Will Match

Gifts that are personal contributions, not merely pledged, to an eligible institution. The MIHS matching gifts are restricted gifts paid directly to the school's industrial hygiene program.

Gifts in the form of checks or money orders (make payable to the university of your choice: Oakland University, University of Michigan, Wayne State University)

Gifts made during the calendar year that are acknowledged by the recipient institution and the form received by the MIHS Matching Grants to Universities Program within six months of the date of the gift.

Administration

The guidelines for administration of the program may be changed, suspended, or terminated at any time by MIHS. If a matching gift is at any time found to be an ineligible gift, MIHS expects the return of the matching gift funds. MIHS reserves the right to audit institutional records and documents pertaining to this program, and to request supporting donor documentation considered necessary.

How The Program Operates

Contributor - completely fill in Part A of the attached form, and transmit the entire form, with the gift, to the eligible institution. The Eligible donor must sign the form. It is recommended that a copy be kept for your records.

Educational Institution - Upon receipt of the gift and form, the designated financial officer of the school verifies the contributor's information, completes Part B of the form, and signs. Mail the entire form with copy of check to:

MIHS
Matching Grants to Universities Program
P.O. Box 128
New Baltimore, MI 48047

MIHS - reviews the form and, upon determination of eligibility, authorizes a contribution to the institution in accordance with the provisions of the Program. Contributions are sent to institutions participating in the Program on a semi-annual basis.

Program Summary

Eligible Donors: MIHS individual members

Eligible Institutions: Graduate and undergraduate schools with industrial hygiene programs within the boundaries of MIHS

Gift Amount:

\$25 Minimum
\$200 Maximum per donor
\$1250 Maximum per eligible institution

Matching Ratio: \$1:\$1 up to \$200

Gift Form: checks or money orders.



Part A: MIHS Member: Complete Part A and send with your gift to the University
Please fill in all data requested accurately. (Please type or print.)

GIFT INFORMATION:

Name of Educational Institution _____

Address: _____

City _____ State: _____ Zip _____

Enclosed is my personal Gift of \$ _____ Money order Check

I am a Graduate Current Student A Supporter
of the above named institution

I Attended From _____ (date) _____ to _____ (date)

and/or received a _____ (BS, MS, MPH, other degree) in _____ (Year)
From the above named institution

I certify that I have read the matching gift guidelines and I affirm that the gift described above meets the guideline for matching. My signature on this form authorizes the above-named educational institution to report this gift to the MIHS Matching Grants To Universities Program for the purpose of qualifying for a contribution

DONOR INFORMATION

Member Name: _____

Social Security #: _____

Address: _____

City: _____ State _____ Zip _____

Member Signature: _____

Date: _____

Part B: TO BE COMPLETED BY SCHOOL Please type or print, an return to:

MIHS
P.O. Box 128
New Baltimore, MI 48047

I hereby certify that a gift of \$ _____ was received on _____ (date) from _____ (name of donor)
and I affirm that this gift will be used to support the Institution's Industrial Hygiene Program.

Signature: _____ Date: _____

Name (printed) _____ Title: _____

Matching Gift Payee _____

Address: _____

City _____ State _____ Zip _____

**MATCHING
GRANTS TO
UNIVERSITIES
PROGRAM**

