



VALDOSTA STATE UNIVERSITY FOUNDATION

Request to Name/Rename an Interior Space

(in recognition of an individual, corporation, foundation or organization)

Date: _____

Point of Origination/Name: _____

Department: _____

Building name (if applicable) _____ Building no.: _____

Current interior space name (if applicable): _____ Room no.: _____

Proposed name of interior space: _____

Naming based upon: outstanding service philanthropic giving both

If naming for an individual, the person is: living deceased

Name of person to be honored: _____

Name of donor(s), if different from honoree(s): _____

Have Honoree(s) or Donor(s) been notified of these intentions: Yes No

Contributions and/or outstanding/meritorious service to institution (can be attached as separate document if necessary):

Biographical Information on Donor(s) [if different from honoree(s)] (can be attached as a separate document if necessary):

If specific financial gift is basis for proposed naming, what is the amount? _____

If gift is pledged, fund amount received to date and terms _____

Faculty/Staff Requestor (print name)

(Signature)

Dean or Director (print name)

(Signature)

Vice President (print name)

(Signature)

Reviewed by (initials): (Confirms philanthropic giving criteria have been satisfied, required regardless of basis of naming)

University Advancement

Facilities

Finance & Administration

Presentation to President on Meeting date: _____

Approved: Yes No

President (print name)

(Signature)

Please transmit copies to:

- Originating office
- Office of the Vice President for University Advancement
- Office of the Vice President for Finance and Administration