



Yes! I am proud to support NWTC students. (Please select one below)

☐ I want my gift to support the NWTC Fund (area of greatest need). ☐ Other: _____

☐ I want to make a gift to the Student Emergency Fund.

_____ \$50 _____ \$100 _____ \$250 _____ \$500 _____ Other

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

☐ I want to learn more about including a donation to support students in my will.

☐ I am interested in establishing a scholarship with the NWTC Educational Foundation.

FY26NWTCWebsite

***Mail to:**

**Attn: Foundation Office
2740 W Mason St
Green Bay, WI 54307-9042**

***Checks payable to the NWTC Educational Foundation**