



**Naming University Facilities and Units, Appendix I
Request for Approval of Donor Naming Proposal
(Approved by the UNCG Board of Trustees 5/1/14)**

**UNIVERSITY OF NORTH CAROLINA AT GREENSBORO
REQUEST FOR APPROVAL OF DONOR NAMING PROPOSAL**

PROPOSED NAME: _____

DESCRIPTION OF THE FACILITY OR UNIT TO BE NAMED: _____

DONOR INFORMATION: _____

DONOR CONTRIBUTION AMOUNT: _____

DATE OF GIFT (RECORDED): _____

GIFT TYPE (IF IT IS NOT A SINGLE PAYMENT, DESCRIBE THE TERMS): _____

PURPOSE: _____

RATIONALE FOR NAMING PROPOSAL (DONOR ACHIEVEMENTS/DONOR RELATIONSHIP WITH UNCG): _____

Name of Nominator (*please print*)

Title of Nominator

Signature of Nominator

Date

I certify that this naming proposal and any accompanying agreement(s) comply with UNCG and UNC Board of Governors' policies.

Vice Chancellor for University Advancement

Date

Chairperson, Advancement Committee
Board of Trustees

Date

- APPROVED**
- NOT APPROVED**

If not recommended for approval, please include the rationale for the Advancement Committee's decision.