



OUR MISSION

Alvarado Education Foundation strives to enhance the learning environment and learning opportunities by generating finances and other resources for the students of Alvarado ISD.

DONATION FORM

☐ I would like to make a one time donation in the amount of \$_____ to the Alvarado ISD Education Foundation. Please apply this deduction on my next pay check.

Or

☐ I would like to make a monthly donation in the amount of \$_____ to the Alvarado ISD Education Foundation. This deduction is to remain in effect until I notify the payroll office in writing.

NAME—PLEASE PRINT

CAMPUS

SIGNATURE

DATE

If you would like to make a donation by credit or debit card, you can do so by visiting www.alvaradoedufoundation.org and clicking on the “Donate” link.