

Request to Install/Name a Memorial or Honorary Bench (in recognition of an individual, corporation, foundation or organization)

DATE:	
Point of Origination:	Name/Development Officer:
	Department:
Location Details (choose	e existing or new bench):
	ch. Please describe the precise location of the bench. It is important to note that not all requests for naming g benches may be honored. You will be contacted to discuss an alternate location if this is the case.
	ed bench. Please describe where you wish the bench to be sited – if it is not possible to site the bench at cation, you will be contacted to discuss an alternate location:
Name of the individual(s	s) or organization(s) to be honored:
If naming for an individu	al, the person is:
Name of donor(s), if diff	erent from honoree(s):
Have Honoree(s) or Do	nor(s) been notified of these intentions?
Contributions and/or our	tstanding/meritorious service to institution:
Biographical Information	n on Donor(s) [if different from honoree(s)]:

Fund amount received to date			
Attach a map* of the area proposed to be named *can be obtained from the Office of the University Architects (706.542.3	3605)		
Faculty/Staff Requestor (print name)	(Signature)		
Dean or Director (print name)	(Signature)		
Assoc. Vice President/Vice President (print name)	(Signature)		
VP for Development and Alumni Relations (Confirms philanthropic giving criteria has been satisfied, requi	ired regardless of basis of naming)		
Sr. VP for Academic Affairs and Provost	VP for Finance & Administration		
Please transmit to: Office of the Vice President for Finance & Administration 230 Administration Building			
Office use only			
Copied to requestors, all signatories, Facilities Mgmt., , and Ol	UA (date)		

Rev. March 2018