



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.

_____ \$25 _____ \$50 _____ \$100 _____ \$250 _____ 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.

FY23NWTCWebsite

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

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