

# ROSE-HULMAN

## INSTITUTE OF TECHNOLOGY

### How to Notify Rose-Hulman Institute of Technology of Your Estate Gift Plans

To formalize your estate gift plans, we would like to know what you would like your deferred gift to accomplish at Rose-Hulman Institute of Technology (“Rose-Hulman”), a brief description of the type of estate gift, and your written estimate of the current value of your estate destined for Rose-Hulman. It is useful, but not mandatory, for us to receive a copy of the relevant section(s) of your estate documentation.

*We recognize that this does not constitute a binding commitment.* It simply permits us to record your estimated gift, recognize you for this intention, and more effectively manage the gifting process at the time of your estate settlement.

To notify Rose-Hulman of your estate intentions:

- Complete and sign the form below
- Retain a copy for yourself
- Return the original along with, if possible, a copy of the relevant sections of your estate documentation (e.g., will or trust)

After you notify us of your estate intentions, you will be invited to become a member of the *1874 Heritage Society*—which recognizes donors who have made planned gifts or who have included Rose-Hulman in their estate plans.

# ROSE-HULMAN

## INSTITUTE OF TECHNOLOGY

### Estate Gift Plans

Gift Purpose: I would like my support to accomplish— \_\_\_\_\_  
\_\_\_\_\_

As an indication of my support for Rose-Hulman Institute of Technology ("Rose-Hulman"), I am pleased to confirm that I have made a provision for Rose-Hulman as follows (select all that apply):

- ☐ Bequest in my **Will**
- ☐ Provision in my **Revocable Living Trust**
- ☐ Establishment of a **Charitable Remainder Trust** held outside of Rose-Hulman
- ☐ Beneficiary designation in my **Qualified Retirement Plan** or **Commercial Annuity**
- ☐ **Life Insurance** Gift
- ☐ Other (please describe)  
\_\_\_\_\_

I estimate the current value of my provision to be approximately \$ \_\_\_\_\_.

Printed Name: \_\_\_\_\_ Class Yr/Age: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Class Yr/Age: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Street \_\_\_\_\_ City: \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_

Telephone \_\_\_\_\_ (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C)

Rose-Hulman Institute of Technology recognizes that the value may change due to unforeseen circumstances. This information will be used only to help Rose-Hulman project potential future financial support and *is not considered a legally binding obligation.*

I worked with the following advisor to establish this estate provision:

Name \_\_\_\_\_ Profession \_\_\_\_\_

Company/Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

***Thank you for generously supporting Rose-Hulman Institute of Technology.***

***Please mail this form to:***

Rose-Hulman Institute of Technology, Office of Planned Giving  
5500 Wabash Avenue, Terre Haute, IN 47803