



## DONOR PROFILE FORM

The Foundation requests individual donors making donations in their own name or in the name of their family foundation, fund or trust to provide the following information. The information will mainly be used for communications with donors and to meet internal analytical needs. The Foundation respects donors' privacy. Personal information provided in this form will not be used in any public documents or shared with other organizations without the donor's written consent.

How did you come to know about the Foundation? \_\_\_\_\_

Name of our Family Foundation/Fund/Trust (if applicable): \_\_\_\_\_

Donor Name: \_\_\_\_\_

Educational Qualifications: \_\_\_\_\_

Higher Secondary School/Pre-university/Intermediate College attended in India (Name, City and State): \_\_\_\_\_

Degree College(s) attended in India (Name, City and State): \_\_\_\_\_

Home state/city/town in India: \_\_\_\_\_

If employed, employer name, city and state: \_\_\_\_\_

Email: \_\_\_\_\_ Phone \_\_\_\_\_ (Home) \_\_\_\_\_ (Cell)

Mailing address: \_\_\_\_\_

Spouse Name: \_\_\_\_\_

Educational Qualifications: \_\_\_\_\_

Higher Secondary School/Pre-university/Intermediate College attended in India (Name, City and State): \_\_\_\_\_

Degree College(s) attended in India (Name, City and State): \_\_\_\_\_

Home state/city/town in India: \_\_\_\_\_

If employed, employer name, city and state: \_\_\_\_\_

Email: \_\_\_\_\_ Phone \_\_\_\_\_ (Home) \_\_\_\_\_ (Cell)

Mailing address: \_\_\_\_\_

We prefer to receive FFE communications at our:

Postal address *or*

Email address