

Donor Designation Form

Donor Name

Phone

Address

City

State

Zip Code

Email

*Please make donation check payable to **Georgia Tuition Aid Providers, Inc** or **GeorgiaTAP** and mail it with a **copy of approval letter within 60 days of the approval date** to the address below.*

Designate donation to the following schools

Please specify each school name and the donation amount in a separate line.

Donor's Signature

Date