Individuals to be honored, if not the same as the donor:

Donor’s full name: ____________________________________________

Spouse’s full name: ____________________________________________

Duke degree (if applicable): ____________________________________

Duke alumni children (if applicable): ____________________________

RECOGNITION INFORMATION

Exact language of named space as it will appear on plaque or other form of recognition:

Planned announcement of naming:

Other information that will be useful to the committee in reviewing the naming request (e.g. awards, special recognitions):

**Note:** New facilities or parts of facilities may be named for an individual who has donated at least 50% of the cost of the facility. Existing buildings or parts of buildings may be named when a donor’s gift covers 50% of the cost for major renovations. Existing unnamed buildings or parts of buildings may be named for a substantial gift to the program housed within. What constitutes “substantial” is determined on an individual basis as recommended to the President by one of the senior officers. No facility or portion of a facility will be named for any member of the faculty or administration (except the President) until that person has been retired for 10 years or deceased for 5 years.

**Required field**

Date of request: ____________________________

Name of requestor: ________________________________________

Fund code associated with naming: ____________________________

Department: ____________________________

Location of the space to be named: ________________________________________

Size of space in sq ft: ____________________________

Please state the justification for the space’s naming:

Financial commitment: ____________________________

Paid to date: ____________________________

**DONOR INFORMATION**

Donor’s full name: ____________________________________________

DADD Entity ID: ____________________________________________

Spouse’s full name: ____________________________________________

DADD Entity ID: ____________________________________________

Duke degree (if applicable): ____________________________________

Duke alumni children (if applicable): ____________________________

**NAMING INFORMATION**

Fund code associated with naming: ____________________________

Department: ____________________________

Location of the space to be named: ________________________________________

Please state the justification for the space’s naming:

Financial commitment: ____________________________

Paid to date: ____________________________

**Required field**

*Note: New facilities or parts of facilities may be named for an individual who has donated at least 50% of the cost of the facility. Existing buildings or parts of buildings may be named when a donor’s gift covers 50% of the cost for major renovations. Existing unnamed buildings or parts of buildings may be named for a substantial gift to the program housed within. What constitutes “substantial” is determined on an individual basis as recommended to the President by one of the senior officers. No facility or portion of a facility will be named for any member of the faculty or administration (except the President) until that person has been retired for 10 years or deceased for 5 years.*

*Required field*