Call Script for NYMC's Days of Giving - General

Hi, [ASK FOR THE NAME OF PERSON YOU ARE CALLING]. This is [YOUR NAME] calling on behalf of New York Medical College. How are you? I'm calling regarding NYMC's Days of Giving. We are looking to raise much-needed funding for student scholarships over a two-day period for the School of Medicine, Graduate School of Biomedical Sciences, and the School of Health Sciences and Practice. We are so appreciative of your past support, and we are hoping that we can count on your support today.

IF YES – That's great – thank you. Can we count on your gift today for [ASK AMOUNT]?

If they say NO, then say:

"What are you comfortable with contributing".

Thank them again.

Can we do this over the phone with your credit card?

If Yes – Take credit card information

If No – Are you in front of a computer? I can direct you to the campaign link. https://daysofgiving.nymc.edu

If they do not want to provide any information over the phone:

- 1. Can we email you a link to the campaign page?
- 2. Ask for or confirm their email address.

Thank you again for helping make NYMC's Days of Giving a success. We couldn't reach this goal without you.

If someone says "call me back later" – Ask when is a good time to reach you and write that time and day down on the form.

If someone says "send me more info" – Ask or confirm their email address and let them know someone will be emailing them the information.

NOTE: This is a two-day campaign, so we cannot send any information via mail.

If donor says No altogether, say – Thank you for all your past support! I hope we can count on you in the future.

Answering Machine:

This message is for [NAME OF PERSON YOU ARE CALLING], this is [YOUR NAME] calling on behalf of New York Medical regarding NYMC's Days of Giving. I hope we can count on your support for student scholarships. To make your gift, call our office at (914) 594-2720 or visit our campaign website at daysofgiving.nymc.edu. Thank you for your support!

Call Script for NYMC's Days of Giving - Graduate School of Biomedical Sciences (GSBMS)

Hi, [ASK FOR THE NAME OF PERSON YOU ARE CALLING]. This is [YOUR NAME] calling on behalf of New York Medical College. How are you? I'm calling regarding NYMC's Days of Giving. I am calling on behalf of the Graduate School of Biomedical Sciences, as we are looking to raise much needed funds for student scholarships at NYMC. We are so appreciative of your past support, and we are hoping that we can count on your support today.

IF YES – That's great – thank you. Can we count on your gift today for [ASK AMOUNT]?

If they say NO, then say:

"What are you comfortable with contributing".

Thank them again.

Can we do this over the phone with your credit card?

If Yes – Take credit card information

If No – Are you in front of a computer? I can direct you to the campaign link. https://daysofgiving.nymc.edu

If they do not want to provide any information over the phone:

- 1. Can we email you a link to the campaign page?
- 2. Ask for or confirm their email address.

Thank you again for helping make NYMC's Days of Giving a success. We couldn't reach this goal without you.

If someone says "call me back later" – Ask when is a good time to reach you and write that time and day down on the form.

If someone says "send me more info" – Ask or confirm their email address and let them know someone will be emailing them the information.

NOTE: This is a two-day campaign, so we cannot send any information via mail.

If donor says No altogether, say – Thank you for all your past support! I hope we can count on you in the future.

Answering Machine:

This message is for [NAME OF PERSON YOU ARE CALLING], this is [YOUR NAME] calling on behalf of New York Medical College's Graduate School of Biomedical Sciences regarding NYMC's Days of Giving. I hope we can count on your support for student scholarships. To make your gift, call our office at (914) 594-2720 or visit our campaign website at daysofgiving.nymc.edu. Thank you for your support!

Call Script for NYMC's Days of Giving - School of Health Sciences and Practice (SHSP)

Hi, [ASK FOR THE NAME OF PERSON YOU ARE CALLING]. This is [YOUR NAME] calling on behalf of New York Medical College. How are you? I'm calling regarding NYMC's Days of Giving. I am calling on behalf of the School of Health Sciences and Practice, as we are looking to raise much needed funds for student scholarships at NYMC. We are so appreciative of your past support, and we are hoping that we can count on your support today.

IF YES – That's great – thank you. Can we count on your gift today for [ASK AMOUNT]?

If they say NO, then say:

"What are you comfortable with contributing".

Thank them again.

Can we do this over the phone with your credit card?

If Yes – Take credit card information

If No – Are you in front of a computer? I can direct you to the campaign link. https://daysofgiving.nymc.edu

If they do not want to provide any information over the phone:

- 1. Can we email you a link to the campaign page?
- 2. Ask for or confirm their email address.

Thank you again for helping make NYMC's Days of Giving a success. We couldn't reach this goal without you.

If someone says "call me back later" – Ask when is a good time to reach you and write that time and day down on the form.

If someone says "send me more info" – Ask or confirm their email address and let them know someone will be emailing them the information.

NOTE: This is a two-day campaign, so we cannot send any information via mail.

If donor says No altogether, say – Thank you for all your past support! I hope we can count on you in the future.

Answering Machine:

This message is for [NAME OF PERSON YOU ARE CALLING], this is [YOUR NAME] calling on behalf of New York Medical College's School of Health Sciences and Practice regarding NYMC's Days of Giving. I hope we can count on your support for student scholarships. To make your gift, call our office at (914) 594-2720 or visit our campaign website at daysofgiving.nymc.edu. Thank you for your support!

Call Script for NYMC's Days of Giving – Physical Therapy (PT)

Hi, [ASK FOR THE NAME OF PERSON YOU ARE CALLING]. This is [YOUR NAME] calling on behalf of New York Medical College. How are you? I'm calling regarding NYMC's Days of Giving. I am calling on behalf of the Physical Therapy program, as we are looking to raise much needed funds for physical therapy scholarships at NYMC. We are so appreciative of your past support, and we are hoping that we can count on your support today.

IF YES – That's great – thank you. Can we count on your gift today for [ASK AMOUNT]?

If they say NO, then say:

"What are you comfortable with contributing".

Thank them again.

Can we do this over the phone with your credit card?

If Yes – Take credit card information

If No – Are you in front of a computer? I can direct you to the campaign link. https://daysofgiving.nymc.edu

If they do not want to provide any information over the phone:

- 1. Can we email you a link to the campaign page?
- 2. Ask for or confirm their email address.

Thank you again for helping make NYMC's Days of Giving a success. We couldn't reach this goal without you.

If someone says "call me back later" – Ask when is a good time to reach you and write that time and day down on the form.

If someone says "send me more info" – Ask or confirm their email address and let them know someone will be emailing them the information.

NOTE: This is a two-day campaign, so we cannot send any information via mail.

If donor says No altogether, say – Thank you for all your past support! I hope we can count on you in the future.

Answering Machine:

This message is for [NAME OF PERSON YOU ARE CALLING], this is [YOUR NAME] calling on behalf of New York Medical College's Physical Therapy program regarding NYMC's Days of Giving. I hope we can count on your support for physical therapy scholarships. To make your gift, call our office at (914) 594-2720 or visit our campaign website at daysofgiving.nymc.edu. Thank you for your support!

Call Script for NYMC's Days of Giving – Public Health (PH)

Hi, [ASK FOR THE NAME OF PERSON YOU ARE CALLING]. This is [YOUR NAME] calling on behalf of New York Medical College. How are you? I'm calling regarding NYMC's Days of Giving. I am calling on behalf of the Public Health program, as we are looking to raise much needed funds for Public Health scholarships at NYMC. We are so appreciative of your past support, and we are hoping that we can count on your support today.

IF YES – That's great – thank you. Can we count on your gift today for [ASK AMOUNT]?

If they say NO, then say:

"What are you comfortable with contributing".

Thank them again.

Can we do this over the phone with your credit card?

If Yes – Take credit card information

If No – Are you in front of a computer? I can direct you to the campaign link. https://daysofgiving.nymc.edu

If they do not want to provide any information over the phone:

- 1. Can we email you a link to the campaign page?
- 2. Ask for or confirm their email address.

Thank you again for helping make NYMC's Days of Giving a success. We couldn't reach this goal without you.

If someone says "call me back later" – Ask when is a good time to reach you and write that time and day down on the form.

If someone says "send me more info" – Ask or confirm their email address and let them know someone will be emailing them the information.

NOTE: This is a two-day campaign, so we cannot send any information via mail.

If donor says No altogether, say – Thank you for all your past support! I hope we can count on you in the future.

Answering Machine:

This message is for [NAME OF PERSON YOU ARE CALLING], this is [YOUR NAME] calling on behalf of New York Medical College's Public Health program regarding NYMC's Days of Giving. I hope we can count on your support for Public Health scholarships. To make your gift, call our office at (914) 594-2720 or visit our campaign website at daysofgiving.nymc.edu. Thank you for your support!

Call Script for NYMC's Days of Giving – Speech-Language Pathology (SLP)

Hi, [ASK FOR THE NAME OF PERSON YOU ARE CALLING]. This is [YOUR NAME] calling on behalf of New York Medical College. How are you? I'm calling regarding NYMC's Days of Giving. I am calling on behalf of the Speech-Language Pathology Program, as we are looking to raise much needed funds for Speech-Language Pathology scholarships at NYMC. We are so appreciative of your past support, and we are hoping that we can count on your support today.

IF YES – That's great – thank you. Can we count on your gift today for [ASK AMOUNT]?

If they say NO, then say:

"What are you comfortable with contributing".

Thank them again.

Can we do this over the phone with your credit card?

If Yes – Take credit card information

If No – Are you in front of a computer? I can direct you to the campaign link. https://daysofgiving.nymc.edu

If they do not want to provide any information over the phone:

- 1. Can we email you a link to the campaign page?
- 2. Ask for or confirm their email address.

Thank you again for helping make NYMC's Days of Giving a success. We couldn't reach this goal without you.

If someone says "call me back later" – Ask when is a good time to reach you and write that time and day down on the form.

If someone says "send me more info" – Ask or confirm their email address and let them know someone will be emailing them the information.

NOTE: This is a two-day campaign, so we cannot send any information via mail.

If donor says No altogether, say – Thank you for all your past support! I hope we can count on you in the future.

Answering Machine:

This message is for [NAME OF PERSON YOU ARE CALLING], this is [YOUR NAME] calling on behalf of New York Medical College's Speech-Language Pathology program regarding NYMC's Days of Giving. I hope we can count on your support for Speech-Language Pathology scholarships. To make your gift, call our office at (914) 594-2720 or visit our campaign website at daysofgiving.nymc.edu. Thank you for your support!

Call Script for NYMC's Days of Giving – School of Medicine (SOM)

Hi, [ASK FOR THE NAME OF PERSON YOU ARE CALLING]. This is [YOUR NAME] calling on behalf of New York Medical College. How are you? I'm calling regarding NYMC's Days of Giving. I am calling on behalf of the School of Medicine, as we are looking to raise much needed funds for student scholarships at NYMC. We are so appreciative of your past support, and we are hoping that we can count on your support today.

IF YES – That's great – thank you. Can we count on your gift today for [ASK AMOUNT]?

If they say NO, then say:

"What are you comfortable with contributing".

Thank them again.

Can we do this over the phone with your credit card?

If Yes – Take credit card information

If No – Are you in front of a computer? I can direct you to the campaign link. https://daysofgiving.nymc.edu

If they do not want to provide any information over the phone:

- 1. Can we email you a link to the campaign page?
- 2. Ask for or confirm their email address.

Thank you again for helping make NYMC's Days of Giving a success. We couldn't reach this goal without you.

If someone says "call me back later" – Ask when is a good time to reach you and write that time and day down on the form.

If someone says "send me more info" – Ask or confirm their email address and let them know someone will be emailing them the information.

NOTE: This is a two-day campaign, so we cannot send any information via mail.

If donor says No altogether, say – Thank you for all your past support! I hope we can count on you in the future.

Answering Machine:

This message is for [NAME OF PERSON YOU ARE CALLING], this is [YOUR NAME] calling on behalf of New York Medical College's School of Medicine regarding NYMC's Days of Giving. I hope we can count on your support for student scholarships. To make your gift, call our office at (914) 594-2720 or visit our campaign website at daysofgiving.nymc.edu. Thank you for your support!

NYMC Days of Giving Sample E-mail Language:
Dear, I am reaching out on behalf of New York Medical College regarding the "Days of Giving" fundraising campaign with a goal of raising much-needed funds for student scholarships over a 2-day period, March 26-27.
As an Ambassador, I have chosen to support Days of Giving, and I am asking that you join me in making a gift today at (insert your Ambassador link here).
Optional for Alumni: As an NYMC alumnus/alumna, scholarship dollars played a critical part in my success as a student, and ultimately in the success of my career. As you know, today's students have even greater challenges in affording the high cost of medical education. Therefore, I hope you will give generously as I have (insert your Ambassador link here).
Optional for Faculty/Staff: As a faculty/staff member at NYMC in the Department of, I take great pride in New York Medical College, especially its talented students. This is why I have chosen to support Days of Giving, and I hope you will too (insert your Ambassador link here).
Optional for School/Program: As an alumnus/alumna/faculty member/staff member of the (insert School or Program), I have directed my gift to specifically support (insert School or Program) scholarships. By using my link (insert your Ambassador link here), your gift will also directly support (insert School or Program) scholarships.
As a Days of Giving supporter, you will be recognized on the website Donor Wall during the two-day campaign. Through your generosity, you will inspire others to join you in making a difference at New York Medical College.
Thank you, in advance, for your support!
Sincerely,
Class of
NYMC Days of Giving Text Script
Hi, it's I am serving as an Ambassador for NYMC's Days of Giving and I am hoping you would make a gift in support of my efforts at (insert your Ambassador link here). Every dollar will support scholarships for NYMC students. All gifts will be doubled through

midnight tomorrow/today only. Hope I can count on you and thanks for your support!



Donation Amount: \$					
School of Health S	ne of Biomedical Sciences Sciences and Practice: herapy		athology	☐ Pub	lic Health
☐ Visa	☐ MasterCard	American Express		Discover	
Cardholder's Name: _					
Credit Card #:			Exp. Date: _		CVV:
Billing Address:					
City:		State:		_Zip:	
Preferred Daytime Ph	none #:				
Preferred Evening Ph	one #:				
Preferred Email:					
Donation Taken By: _					
Donation Date:					



https://daysofgiving.nymc.edu