

UNIVERSITY COLLEGE

 Washington University in St. Louis

PAYROLL DEDUCTION FORM

1. INDIVIDUAL INFORMATION	
DATE	SEMESTER / YEAR
STUDENT NAME (Print)	STUDENT ID
EMPLOYEE NAME (If different from student)	EMPLOYEE ID
EMPLOYEE EMAIL ADDRESS	EMPLOYEE PHONE NUMBER
EMPLOYEE DEPARTMENT	HIRE DATE

2. COURSE INFORMATION	
COURSE TITLE	COURSE NUMBER / SECTION NUMBER
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COURSE TITLE	COURSE NUMBER / SECTION NUMBER
AMOUNT TO BE PAYROLL DEDUCTED	PAYROLL TYPE (Monthly / Biweekly)

NOTE: Balances less than \$200 will be deducted in one installment. Balances of more than \$200 can be deducted in multiple paychecks. Form can be faxed to (314) 935-6744 or mailed to Campus Box 1085, 11 N. Jackson Rd., Ste. 1000 St. Louis, MO 63105.

Fall / Spring: The account balance will be deducted in either 4 monthly or 8 biweekly installments and will begin on the next available paycheck. **Summer:** The account balance will be deducted in either 3 monthly or 6 biweekly installments and will begin on the next available paycheck.

I hereby authorize the Washington University Payroll Department to immediately begin deducting \$_____ per paycheck for _____ paychecks from my salary to pay the balance owed to University College. If I should terminate my employment at Washington University before the balance is paid in full, I authorize Washington University to deduct the balance from my final paycheck. If this deduction does not occur, I realize that I am responsible for any outstanding balance and collection charges that may result.

SIGNATURE

DATE

UNIVERSITY COLLEGE APPROVAL

DATE