

**Payroll Deduction Authorization Form**

**EMPLOYEE INFORMATION**

Last name:		First:		Middle:
Panther ID:	<input type="checkbox"/> Staff	<input type="checkbox"/> Admin	<input type="checkbox"/> Faculty	
Work Phone#		FIU Email:		

Please check the following summer camp items that you chose through the online registration system.

<p><b>CAMPERS</b></p> <p><input type="checkbox"/> 1 camper</p> <p><input type="checkbox"/> 2 campers</p> <p><input type="checkbox"/> 3 campers</p> <p><input type="checkbox"/> 4 campers</p>	<p><b>WEEKS PER CAMPER</b></p> <p><input type="checkbox"/> 1 week (FIU Employee) \$300 Two payment deduction approximately = \$150.00*</p> <p><input type="checkbox"/> 2 weeks (FIU Employee) \$600 Four payment deduction approximately = \$150.00*</p> <p><input type="checkbox"/> 3 weeks (FIU Employee) \$900 Six payment deduction approximately = \$150.00*</p> <p><input type="checkbox"/> 4 weeks (FIU Employee) \$1,100 Eight payment deduction approximately = \$137.50*</p> <p>*Does not include additional items. The prices above reflect PER camper.</p>	<p><b>ADD-ONS</b></p> <p><input type="checkbox"/> Additional T-Shirt \$10 _____ (Quantity)</p> <p><input type="checkbox"/> Early/Late Care \$50 _____ (Number of weeks)</p> <p><input type="checkbox"/> Lunch \$55 _____ (Number of weeks)</p> <p><input type="checkbox"/> Camp Bag \$50 _____ (Quantity)</p> <p>These items will be added on to your total and dispersed throughout your payroll deduction program.</p>
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**EXAMPLE**

**PAYMENT TERM**

4 Week Session \$1,100	Amount owed for summer camp	\$
Additional Items +\$210.00 (Early/late care x4 +1 shirt)	One time processing fee	+
Processing Fee +25.00 (one-time fee)		25.00
Total Deduction Amount \$1,335.00 (per camper)	Total Deduction Amount	\$
\$1,335.00 divided by 8 payments = \$166.88 per pay period		

**PAYMENT SCALE (FOR HR USE ONLY)**

1 week - 2 pay periods; 2 weeks - 4 pay periods; 3 weeks - 6 pay periods; 4 weeks - 8 pay periods; 5 weeks - 8 pay periods

Payment Scale level will be approved upon salary verification from Human Resources. Payroll deduction is only available for benefit-eligible employees.

Approval expires on _____/_____/_____	HR Verification By: _____	Date: _____
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**AGREEMENT & PROMISSORY NOTE**

By my signature below, I authorize CASE Camp Discover to:

- 1) Verify on a periodic basis my salary with Human Resources, and
- 2) Authorize payroll deductions from my paycheck as indicated below without any notice as set forth in FIU Regulation 1111 (Employee Debt Collection).

I promise to pay any outstanding balance owed in connection with this summer camp registration regardless of my employment status with Florida International University (FIU). I acknowledge that any amount owed on this summer camp registration becomes due immediately upon the end of employment with FIU and authorize deduction from my final salary payment for any outstanding balance, including but not limited to deduction from any annual leave or sick leave payout if applicable, less statutory deductions, such as child support and/or alimony. **There are no refunds made through the payroll deduction process.**

All payroll deduction orders are subject to review and approval by the office manager prior to completion of the transaction. Terms and conditions apply

Employee's Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

Enrollment Date of Payroll Deduction: \_\_\_\_\_

Eligibility Verified and Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_