FIU | Arts, Sciences & Education
FLORIDA INTERNATIONAL UNIVERSITY

CAMP EXPLORE

Payroll Deduction Authorization Form

EMPLOYEE INFORMATION

Last name:	First:		Middle:

Panther ID:	☐ Staff	☐ Admin	☐ Faculty

Work Phone#	FIU Email:

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

CAMPERS

☐ 1 camper
☐ 2 campers
☐ 3 campers
☐ 4 campers

WEEKS PER CAMPER

☐ **1 week (FIU Employee) $325**
Two payment deduction approximately = $162.50*

☐ **2 weeks (FIU Employee) $650**
Four payment deduction approximately = $162.50*

☐ **3 weeks (FIU Employee) $975**
Six payment deduction approximately = $162.50*

☐ **4 weeks (FIU Employee) $1,200**
Eight payment deduction approximately = $150.00*

*Does not include additional items. The prices above reflect PER camper.

ADD-ONS

☐ **Additional T-Shirt $10** _____ (Quantity)

☐ **Early/LateCare $60** _____ (Number of weeks)

☐ **Lunch $60** _____ (Number of weeks)

☐ **Camp Bag $50** _____ (Quantity)

These items will be added on to your total and dispersed throughout your payroll deduction program.

EXAMPLE

4 Week Session $1,200
Additional Items   +$250.00 (Early/late care x4 +1 shirt)
Processing Fee   +25.00 (one-time fee)
Total Deduction Amount **$1,475.00** (per camper)
$1,475.00 divided by 8 payments = $184.38 per pay period

PAYMENT TERM

Amount owed for summer camp	$
One time processing fee	+ 25.00
Total Deduction Amount	$

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:

AGREEMENT & PROMISSORY NOTE

By my signature below, I authorize CASE Camp Explore 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: _____