

PRAIRIE VIEW A&M UNIVERSITY PAYROLL DEDUCTION AUTHORIZATION FORM FOR PANTHER EMPLOYEE SCHOLARSHIP/WAIVER PROGRAM

Payroll deduction will be available for eligible employees only to cover the remaining statutory tuition & others fees that the employee is responsible for paying out of pocket. The deductions will begin with September 1 paycheck and end by November 1 paycheck for monthly employees for fall tuition and begin with January 1 paycheck and end with April 1 paycheck for monthly employees for spring tuition. The deductions will begin with last paycheck in August and end with last paycheck in October for bi-weekly employees for fall tuition and begin with last paycheck in December and end with last paycheck in March for bi-weekly employees for spring tuition. The deduction will not be available for summer terms. Payroll deduction applications must be submitted by August 1 for fall and December 1 for spring for all employees.

INSTRUCTIONS: Complete Part I & II and submit to Payroll Department in the W.R. Banks Building, at the Financial Administration Window on the 1st floor

PART I APPLICANT INFORMATION

| | | | |
|--|---------------|---|--|
| Name: | | Email: | |
| UIN: | Student ID #: | Phone: | |
| Current Mailing Address: | | | |
| City: | State: | ZIP Code: | |
| Department Employed: | | | |
| Employee's Job Title: | | | |
| <input type="checkbox"/> Undergraduate Student <input type="checkbox"/> Graduate Student | | Total semester credit hours registered for: _____ | |
| Applicant's Signature: | | Date: | |

PART II AUTHORIZATION FOR PAYROLL DEDUCTION

I authorize \$ _____ to be deducted from my _____ monthly or _____ bi-weekly payroll beginning and ending on the dates outlined in the Panther Employee Scholarship/Waiver Policy and Procedures for _____ Fall or _____ Spring. I understand I will be assessed an installment carrying fee. The fee will be added to my tuition and fee account if my payments are not paid in full by the 1st installment due date of the semester. All deductions will be made according to my pay cycle. I agree to give at least 30 days advanced written notification to the Office of Payroll if I wish to cancel the auto payroll deduction. I understand that if I cancel my deduction during the middle of the semester term and/or prior to the full payment of my tuition and fees for that term, I am responsible for paying my remaining tuition and fee account balance that I am responsible for prior to the installment due dates. I understand that if I fail to pay by the installment due dates, I will be assessed a \$50.00 installment late fee per late installment and I will not qualify for any future Panther Employee Scholarship/Exemption until my balance is paid in full.

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| Employee Signature: | Date: |
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PART III TO BE COMPLETED BY PAYROLL OFFICE

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| Director of Payroll Office: | Date: |
|-----------------------------|-------|