Workstudy Payroll Deduction Authorization

I, _____, authorize St. Mary's University to
Print Name

deduct 100% of my work-study earnings from my pay to help defer my student account balance for the
□ Fall semester □ Spring semester □ Summer semester □ Academic year

If I elect to participate for the academic year, I understand that this deduction will continue automatically for the spring semester.

I understand by signing this authorization it will stay in place for the period designated above. If I choose to terminate the deduction, I understand I must authorize the termination on this form in the Payroll office (STLH124) and it cannot be restarted during the current semester.
In the event that my employment with St. Mary's University ends during the above period of deductions, I will make alternative payment arrangements with the Business Office immediately for the remaining balance

_____.
Print Name

Student Employee:

_____ _____
Sign Date Print

ID #_____ Deduction Code: ___BWS

Please terminate this deduction effective _____ for the _____ semester.

_____
Print name

_____
Signature

Please terminate this deduction effective _____ for the _____ semester.

_____
Print name

_____
Signature