



Summer Youth Program – Summer 2019

Payroll Deduction Authorization

Faculty/Staff Information

Last Name

First Name

Employee ID

E-mail Address (*firstname.lastname@nau.edu*)

Work Phone

Mobile Phone

Child's Name	Sessions I & II: <i>June 3 – August 9</i>	Total
_____	Full Day - \$1280	_____
_____	Full Day - \$1280	_____
_____	Full Day - \$1280	_____
_____	Full Day - \$1280	_____
Total Deduction: _____		Total per Pay Period: _____

- Total amount due will be deducted in 5 equal payments of \$256 from pay periods: Friday, May 24th, 2019 – Friday, July 19th, 2019.
- Camper(s) must be registered for both summer sessions I & II.
- All benefit eligible faculty/staff employees of NAU are eligible for payroll deduction.
- Parent/Guardian must sign up for payroll deduction by Monday, May 6th, 2019 to be eligible.
- By enrolling in payroll deduction the employee is committing to the SYP session rate and in the event of a cancellation will be responsible for the payment of each session (1&2) in its entirety. We will not consider pro-rated reimbursements.
- Should a separation of employment with NAU occur during the term of this authorization, the Asst Director of Campus Recreation will review each separation on a case-by-case basis. All options will be communicated with the former NAU employee.
- No reimbursements will be given for absences due to vacation, short-term illness of 4 days or fewer or other personal commitments that prevent attendance.

*I hereby authorize Northern Arizona University to initiate a payroll deduction for my child(ren) to attend Campus Recreation Summer Youth Programs. **This authorization gives NAU permission to deduct registration fees, from (5) pay periods: Friday, May 24th, 2019 – Friday, July 19th, 2019.** By signing below I acknowledge that the information I have provided is accurate and I have read and agree to the terms set forth for payroll deduction.*

Employee Signature

Date

FOR OFFICE USE ONLY

Date Received: _____

Date Sent to EMF: _____

Date entered into FUSION: _____

Date Submitted to HR: _____

Submitted By: _____