

Human Resources

Payroll Deduction Authorization

I, _____ hereby authorize Northern Arizona University
(Print employee's name)
to deduct from my wages the sum of \$ _____ per pay period, beginning _____
(Date)
until the total amount of \$ _____ has been deducted. I understand that the amount due
may be increased as a result of additional interest, fees, and other costs* incurred by me.

Purpose of deduction: _____
(Brief description with supporting documentation attached if necessary)
In the event my employment ends for any reason before the final deduction is made, I agree that the balance may be
deducted from my final wages.

Employee Signature: _____ Employee ID Number (not SSN): _____
Date: _____

HR Office Use Only

Acknowledged: _____ Date: _____

Additional Information: _____

*Information on interest, fees, and other costs can be found at <http://nau.edu/SDAS/>