



ALMA COLLEGE

Student Payroll Deduction Form

This form is to be used to establish a payroll deduction for repayment of your student account balance with Alma College. You may change your election at any time by completing a new Student Payroll Deduction Form.

Date _____

Student Name _____

Student ID Number _____

Email _____

Phone Number _____

Amount or Percent to be deducted each pay _____

Date to start deduction _____

Date to end deduction _____

I HEREBY AUTHORIZE the Alma College Payroll Department to deduct the above amount from my payroll earnings for the period specified, and to apply the payments to my student account with the College. I understand that the Payroll Department has no access or knowledge about my student account balance, therefore the deduction will continue until the deduction ending date unless I request otherwise.

Employee Signature

Date

If you have any questions about your student account, contact Denise McCracken, Student Account Specialist, at mccrackendm@alma.edu or by phone at (989)463-7453.

Return the completed form to the Payroll Office located in the lower level of the Hamilton building.