

## Your Employee I.D. Card "The Way to Pay"

## Payroll Deduction Authorization

## **Return Completed Form to Hospitality Services - University Commons Room 100**

This form is used to initiate payroll deductions to fund your Pioneer Express Card. If you would prefer to open the account by paying with a credit card or want further information about the Pioneer Express Card program please go to the <u>Pioneer Express web page</u>. You can also receive further information about the Pioneer Express Card by calling the Hospitality Services at extension 2672.

| New Deduction     | Change Deduction | □ Renewal | □ Terminate Deduction |
|-------------------|------------------|-----------|-----------------------|
| Employee's Name:  |                  |           |                       |
| Employee's Banner | ID:              | _         |                       |
| Deduction Amount: |                  |           |                       |
| One Time Deducti  | on of \$         |           |                       |
| Bi-Weekly Deduct  | ion of \$        |           |                       |

□ Enroll me in the Employee Meal plan (select one below)

## □ 12- Month Employee - \$10 bi-weekly for 26 pay periods for \$300 meal plan (full time) □ 10- Month Employee - \$12 bi-weekly for 22 pay periods for \$300 meal plan. (part time)

I hereby authorize William Paterson University to make the above deductions for my paycheck(s). I understand that the Pioneer Express Card is not an ATM card and I may not withdraw the cash from my account.

| Employee's Signature   |          | Date |  |  |  |
|--|----------|------|--|--|--|
| Hospitality Services and Payroll and Employee Benefits Use Only  |          |      |  |  |  |
| Employees Pioneer Express Card credited for \$   | on       | _by  |  |  |  |
| Payroll Deductions Started PP by   | Verified |      |  |  |  |
| Please fax this form to Hospitality Services @ 973-720-3266<br>or scan and e-mail to hospitalityservices@wpunj.edu |          |      |  |  |  |