



Office of Student Financial Aid
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Federal Work-Study Voluntary Payroll Deduction Authorization Form

According to federal regulations (34 CFR 675.16(b) & (d) and 34 CFR 676.25), students may choose to dedicate all or part of their Federal Work-Study compensation to their student account. With a student's permission, Wilberforce University may credit the student's account to satisfy current award year charges for tuition and fees; room and board; as well as, other institutionally provided educationally related goods and services. Please be advised, however, Wilberforce University may only credit a student's account to pay **prior year award year charges** if these charges are **not more than \$200.00**.

If a student chooses to modify or cancel this written authorization, the modification will take effect on the date Wilberforce University receives it. If the student chooses to cancel this authorization, as per the federal regulations, Wilberforce University may use the Federal Work-Study earnings to pay only those authorized charges incurred by the student before the institution received the cancellation notice.

Part I. Student Information

_____	_____
Student Name (Printed)	Student Identification Number

Student Address (Address, City, State, Zip Code)	
_____	_____
Student Email Address	Student Phone Number

Part II. Student Authorization

I, _____ hereby authorize **Wilberforce University** to
Student Name (Printed)
deduct from my wages for _____
Reason for the Deduction
the sum of \$ _____, beginning _____ and ending _____
Amount Date Date
until the total amount of \$ _____ has been deducted.
Amount

In the event my employment ends for any reason before the final deduction is made, the entire balance may _____(X) or may not _____(X) be deducted from my final wages.

Part III. Cancellation Request

_____ Please **CANCEL** my Federal Work-Study Payroll deduction authorization.

Part IV. Student Signature

_____	_____
Student Signature	Date