

**University of Southern Maine  
Payroll Deduction Authorization  
Payment for Tuition and Fees**

**USM Employee Information**

Name: \_\_\_\_\_

Campus Address: \_\_\_\_\_

PeopleSoft/MaineStreet ID: \_\_\_\_\_ Office Phone: \_\_\_\_\_

**Payroll Deduction**

Please deduct \$ \_\_\_\_\_ from each bi-weekly / monthly (circle one) paycheck.

The deduction will begin on \_\_\_\_\_ and continue until the goal of \$ \_\_\_\_\_ is reached.

\_\_\_\_\_ The deduction is to be applied to my student account.

Or

\_\_\_\_\_ The deduction is to be applied to the account of my dependent:

Name: \_\_\_\_\_

Student ID #: \_\_\_\_\_ Relationship: \_\_\_\_\_

Attending the University of Maine at: \_\_\_\_\_

**Authorizing Signature**

I authorize the University of Southern Maine to make the above specified deduction (s) and apply the amount to a student account for payment of educational expenses.

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Student Accounts Office Approval: \_\_\_\_\_ Date: \_\_\_\_\_

RETURN COMPLETED FORM TO:  
Student Financial Services  
101 Bailey Hall  
Gorham Campus

**All balances must be paid in full prior to the end of the semester or term for which the deduction is authorized.  
Past due balances will prevent further registration.**