



**HEALTH PROMOTION
AND WELLNESS**
Illinois State University.

STATE
your wellness.

Health Promotion and Wellness | 187 McCormick Hall | (309) 438-WELL | Wellness.IllinoisState.edu

PAYROLL DEDUCTION FORM

for Summer 2017 Semester Lifestyle Enhancement Program

Illinois State University Health Promotion and Wellness
Payroll Deduct Authorization for Wellness Program Fees

Name (print) _____ University ID # _____

I hereby authorize Illinois State University to deduct \$_____.____ from each of my payroll checks.

This will terminate when a total of \$_____ is reached. The total deduction to be completed by June 30, 2017.

Signature _____ Date _____

I am paid (check one): _____ Hourly _____ Monthly _____ Exempt Semi-Monthly