



100 Grant Street • De Pere, WI 54115-2099 • www.snc.edu

STUDENT PAYROLL AUTHORIZATION

I hereby authorize St. Norbert College to apply the percentage listed below to my tuition account at the College Finance Office from my payroll earnings and if necessary, make adjustments.

The Payroll Office shall provide me with earnings documentation on a bi-weekly basis in the form of a payroll check stub.

Please apply the following percent of my earnings toward my **tuition account** with the Finance Office. (Check one).

25% 50% 75% 100%

Name: _____

SNC ID#: _____

Home Address: _____

Phone Number: _____
(On campus)

This signed agreement will be on file in the Payroll Office and will remain enforce until such time written cancellation is received by the student. Cancellation will take effect 7 working days from the date of request. Once the payroll deposit is posted to the student account, unless there is a credit balance on the account, the deposit becomes non-refundable.

Student Signature: _____

Date: _____

*** Deposit into tuition account is optional.**