

Florida A&M University
9 over 12-Month Payment Option Form
Academic Year 2022-2023

Deadline to submit form to Academic Affairs: August 19, 2022

Employee Name: _____ **Employee ID:** _____

Department/College Name: _____

Work Number: _____ **E-mail Address:** _____

By choosing the 9 over 12-Month Payment Option, I understand that I will have the amount specified below deducted from each biweekly paycheck covering the checks dated September 9, 2022, through May 5, 2023.

The first deduction will be taken on: September 9, 2022

The last deduction will be taken on: May 5, 2023

During the summer months, I will receive 5 equal payments on these dates of all the money saved:

1. June 2, 2023
2. June 16, 2023
3. June 30, 2023
4. July 14, 2023
5. July 28, 2023

***Minimum deduction amount is \$50 per pay period.**

I hereby authorize the deductions below from my paychecks for each biweekly payment I receive during the 2022-2023 academic year.

Academic year (2022-2023) paycheck deduction amount: \$ _____ (Pay dates 9/9/22 – 5/5/23)

I certify that, I have read the 9 over 12-Month Payment Option form and do understand that the 9 over 12-Month Payment Option is irrevocable during the coverage period of this form. I acknowledge that I will remain enrolled in the deferred 9 over 12-Month Payment Option Plan at the amount indicted above, unless I indicate in writing that I plan to opt out or change my deduction amount. If there are no changes to the 9 over 12-Month Payment Option plan a new form will **not** be required.

For questions, please call Academic Affairs at 599-3276 or Payroll at 599-3611.

Employee Signature: _____ Date: _____