



Twelve-Month Payment Option Form Academic Year 2019 – 2020

(Annual Enrollment)

*Deadline to be received in Payroll Services is Friday, August 16, 2019

Employee Name:

Employee ID:

Dept/College Name:

Date of Birth:

Work Phone Number:

E-mail Address:

By choosing the Twelve-Month Payment Option, I understand that I will have the amounts specified below deducted from the net pay (after deductions and taxes) of each biweekly paycheck that I receive during the fall and spring semesters. The minimum deduction amount is \$100.00 per pay period.

The first deduction will be taken on: **August 30, 2019**

The last deduction will be taken on: **May 8, 2020**

I hereby authorize the deductions below from the net pay of my biweekly paychecks I receive during the fall and spring semesters.

Regular Paycheck Period: x 12 =

Total Amount Withheld During Paydates
08/30/19 - 01/31/20

Double-Deduction Period: x 7 =

Total Amount Withheld During Paydates
02/14/20 - 05/08/20

Total Deferred:

Summer Disbursement Amount:

Total Deferred / 5 pay periods

During the summer months, I will receive five payments on the following paycheck dates:

1. **June 5, 2020**
2. **June 19, 2020**
3. **July 2, 2020**
4. **July 17, 2020**
5. **July 31, 2020**

Note: This last payment may fluctuate slightly due to rounding

I certify that I have read the [Frequently Asked Questions](#) and do understand that if I request my funds earlier than the summer disbursement period, all funds will be refunded and my enrollment will end for coverage period specified on this form. Each academic year, I must sign a new form to enroll in the Twelve-Month Payment Option Plan and submit it to Payroll Services by the required deadline.

Note: the employee should use one of the below options to submit the enrollment form to Payroll Services:

1. The employee may electronically sign the form and select the SUBMIT icon to automatically e-mail the form to Payroll@fsu.edu.
2. The employee may print and sign the form and submit to Payroll Services via hand-delivery, U.S. mail, or scan and e-mail to Payroll@fsu.edu.

Please send any questions related to this benefit program to Payroll@fsu.edu.

Employee Signature:

Date: