

**Payroll Deduction Form**

This is my authorization for the ETSU Payroll Department to make a monthly deduction from my paycheck to be deposited to my ETSU ID Debit Card account.

Name ID #

Last (please print) First Initial

Department Campus Box Phone

Monthly amount to be deducted. $

(minimum $5.00)

Please check one below:

NEW ACCOUNT

CHANGE AMOUNT OF DEDUCTION FROM: $ TO: $

DISCONTINUE CURRENT DEDUCTION

All requests for payroll deduction changes for debit card accounts must be submitted to Campus ID Services Only. Please submit by the 14th of the month in order to make changes for that

month’s paycheck.

Authorization Signature of Employee Date

# Campus ID Services

**East Tennessee State University**

**P. O. Box 70611**

**Johnson City, TN 37614-0611 Phone: (423) 439-8316**

<http://www.etsu.edu/students/idservices/> E-mail – [IDBUCS@etsu.edu](mailto:IDBUCS@etsu.edu)