

Hampton University
Hampton, VA 23668

DATE: _____

EMPLOYEE: _____

HU ID# _____

DEDUCTION AGREEMENT

I, _____, acknowledge indebtedness to
Hampton University in the amount of \$ _____ for _____.

I authorize the payroll Office to deduct \$ _____ per
pay period beginning _____ until the balance is paid full.

If for any reason I leave the University, I agree to pay the balance of my indebtedness.
from my final check. In the event that my final payroll check does not cover the balance,
I agree to pay Hampton University the difference.

Signature: _____

Date: _____

Denise Nichols
Assistant Vice President for Finance and Comptroller

FOR BUSINESS OFFICE USE ONLY

Approved: _____

Disapproved: _____