

Employee Name (please print):

East Grand Forks Campus

2022 Central Avenue NE East Grand Forks, MN 56721 Phone: 218.793.2800 **Thief River Falls Campus** 1101 Highway One East Thief River Falls, MN 56701

Phone: 218.683.8800

Employee ID:

## **EMPLOYEE PAYROLL DEDUCTION - PARKING FEE AUTHORIZATION**

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Northland Community and Technical College (Northland) parking fees are established in accordance with Northland Policy and Procedure. Employee fees are payable via payroll deduction on a pre-tax basis. Please complete the forbelow and return to Michelle Benitt, Assistant Director of Human Resources, if you elect to have the parking fees payable via payroll deduction. <b>This payroll deduction will continue in subsequent years unless the authorization revoked.</b> To revoke this authorization, a written notice must be sent to Michelle Benitt, Assistant Director of Human Resources at <a href="mailto:michelle.benitt@northlandcollege.edu">michelle.benitt@northlandcollege.edu</a> .	rm ı <b>is</b>
<ul> <li>Employees will be charged per year according to the rates determined by Northland Policy 6010 and Proc 6010P.</li> </ul>	edure
<ul> <li>Employees who teach or work only off campus are exempt; please notify Michelle Benitt if you meet this condition and submit the waiver request below.</li> </ul>	
<ul> <li>Employees on leave of absence or sabbatical for at least one full academic term or six months will have the parking fee prorated.</li> </ul>	neir
<ul> <li>Employees who do not park on any Northland property may submit a request for a waiver subject to app the Northland President.</li> </ul>	roval by
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I authorize Northland Community and Technical College to deduct the Northland parking fee from my paycheck. It signature on this form indicates my authorization. Please process my parking fee as follows:	Лу
Permanent Employees:	
Two payroll deductions each semester (Fall/Spring)	
Four payroll deductions each semester (Fall/Spring)	
Adjunct/Temporary Faculty:	
Two payroll deductions each semester (Fall and/or Spring)	
Signature: Date:	
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Waiver Request: I certify that I do not park on any Northland property and am requesting the fee be wa	ived.
Signature: Date:	
<u>Please Note:</u> Employees who elect not to pay parking fees via payroll deduction are to consider this correspondence an invoice of the park	ing

A MEMBER OF MINNESOTA STATE

fees and are to make a check payable to Northland and submit to Michelle Benitt, Assistant Director of Human Resources on an annual basis.