

Authorization to Apply Earnings to

OWU Student Account

2023 – 2024 Academic Year

Name: _____

OWU Student ID: _____

Please apply the following earnings from my payroll checks to my student account for this academic year:

Amount per Pay Period \$ _____ or All Wages

Student Signature

Date

Only complete this section if stopping a current deduction:

Please Stop Payroll Deductions as of: _____

Student Signature: _____