IDs, MSC 3ID
idsvs@nmsu.edu
Phone: 646-2306
Fax: 646-7814

New Mexico State University
Parking & ID Card Services

Faculty/Staff Meal Plan Payroll Deduction Authorization

This form is used to establish payroll deduction for payment of your Faculty/Staff Meal Plan. Please submit a completed form to the Parking & ID Card Services Office, located on the second floor of the NMSU Bookstore.

Print Name: (Last, First, Middle Initial) Aggie ID#

Dept. Name Dept. Phone#

Dept. Mail Stop Code E-Mail Address

You must also complete a Faculty/Staff Meal Plan Agreement and submit it along with this form. You may obtain forms or additional information at https://dining.nmsu.edu/ or by calling the Parking & ID Card Services office at (575) 646-2306.

AUTHORIZATION FOR PAYROLL DEDUCTION:

I hereby authorize New Mexico State University to process a payroll deduction for payment of a Faculty/Staff Meal Plan. The appropriate deduction amount will be taken from each pay period, according to the selection below. I understand that I may cancel this deduction at any time as long as my account balance is paid in full. In the event of termination of my employment with NMSU, I authorize the deduction of any balance owed from my final paycheck. I understand that I am liable for all unpaid balances.
Please make selection:

One-time deduction of _____ for the _____ meal plan

Crimson Club-$625: _____Two pay periods - $312.50/pay period _____Four pay periods - $156.25/pay period

Aggie Essential-$475: _____Two pay periods - $237.50/pay period _____Four pay periods - $118.75/pay period

Campus Starter-$325: _____Two pay periods - $162.50/pay period _____Four pay periods - $81.25/pay period

Pete's 150-$135: _____Two pay periods - $67.50/pay period _____Four pay periods - $33.75/pay period

Pete's 300-$270 _____Two pay periods - $135.00/pay period _____Four pay periods - $67.50/pay period

Pete's 450-$405 _____Two pay periods - $202.50/pay period _____Four pay periods - $101.25/pay period

Signature_____Date_____

INTERNAL DEPARTMENT USE ONLY

Date Received:_____ Date of payroll verification:_____

Date Entered in System:_____ Notes:_____