PAYROLL DEDUCTION AUTHORIZATION  
ACADEMIC YEAR 2015-2016

I ________________, hereby authorize Northwestern University to deduct from my salary $_________ in _______ monthly payroll deductions for payment of the health insurance and/or grad housing charges as follows:

<table>
<thead>
<tr>
<th></th>
<th>HEALTH INSURANCE</th>
<th>GRAD HOUSING</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FALL QUARTER</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>September 30, 2015</td>
<td>___________</td>
<td>___________</td>
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<tr>
<td>October 30, 2015</td>
<td>___________</td>
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<tr>
<td>November 30, 2015</td>
<td>___________</td>
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<td>___________</td>
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<tr>
<td><strong>WINTER QUARTER</strong></td>
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<tr>
<td>December 30, 2015</td>
<td>___________</td>
<td>___________</td>
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<tr>
<td>January 29, 2016</td>
<td>___________</td>
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<tr>
<td>February 29, 2016</td>
<td>___________</td>
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<tr>
<td><strong>SPRING QUARTER</strong></td>
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<tr>
<td>March 31, 2016</td>
<td>___________</td>
<td>___________</td>
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<tr>
<td>April 29, 2016</td>
<td>___________</td>
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<tr>
<td>May 31, 2016</td>
<td>___________</td>
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<tr>
<td><strong>SUMMER QUARTER</strong></td>
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<tr>
<td>June 30, 2016</td>
<td>___________</td>
<td>___________</td>
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<tr>
<td>July 29, 2016</td>
<td>___________</td>
<td>___________</td>
<td>___________</td>
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<tr>
<td>August 31, 2016</td>
<td>___________</td>
<td>___________</td>
<td>___________</td>
</tr>
</tbody>
</table>

_________  Date  ________________  Student Signature  _______________  Student ID#

_________________  Payroll ID#

Program/Department: ___________________________  Phone: __________________________

Notes: This form must be delivered to the Office of Student Accounts before the 8th of the month in which the deductions are to begin.
- Health insurance and grad housing deductions are now allowed from September 2015 through August 2016.
- Deductions for the 2015-2016 academic year are not permitted beyond 8/31/16

OFFICE OF STUDENT ACCOUNTS, 555 CLARK STREET, RM. 007 EVANSTON CAMPUS - 1221

Rev5/29/15  
Payroll Form