University of Nebraska at Omaha Emergency Loan Fund Payroll Deduction Form

I	_, hereby authorize my employer, The University of
I	each pay period beginning with the
pay period and continuing until the debt of	f\$, which I owe to the University
of Nebraska at Omaha, is satisfied. The repayment period mus	t not exceed one year from the date of this form.
I am paid on the (check one) bi-weekly payroll	monthly payroll
Subject to wage and hour laws, I further authorize The University of Nebraska at Omaha to deduct any outstanding balance due under this loan from my final paycheck upon my separation from employment at The University of Nebraska at Omaha.	
EMPLOYEE SIGNATURE:	
Last Four Digits of Social Security Number:	
Confirmation of Receiving Loan Check: This section is to be completed upon acceptance and delivery of the Emergency Loan check by the employee.	
Check #	
Employee Signature:	Date:
For Office Use Only:	
ELF Loan Repayment Deduction Begins:	
Copy to Payroll:	