**MEAL PLAN AUTHORIZATION FOR PAYROLL DEDUCTION**

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **PAYROLL DEDUCTION INFORMATION (please use this form to request payroll deduction for your meal plan)** | | | | | | | |
| * You can elect to have the cost of your meal plan taken out of one paycheck, or split equally over 2, 3, or 4 paychecks. * All meal plan deductions will begin on the February B paycheck and can continue through your May B paycheck (depending on number of pay periods elected). Deductions are taken on each ‘B’ paycheck. * Unused FAST Block Meals and Points are non-refundable while employed by UW-Green Bay. * FAST Block Meals and/or FAST Points will be loaded to your University ID within two business days following purchase. | | | | | | | |
| **MEAL PLAN OPTIONS** | | | | | | | |
| FAST 70 Block Plan – includes 70 meals plus 100 brewed coffee/fountain soda swipes \* – **$440**  FAST 50 Block Plan – includes 50 meals plus 50 brewed coffee/fountain soda swipes\*– **$320**  FAST 25 Block Plan – includes 25 meals – **$165**  ***\*Coffee and fountain soda swipes can be redeemed at all Dining retail locations on campus. The above FAST plans are only good for the 2023-2024 academic year and must be used by June 30, 2024. Chartwells is sponsoring the brewed coffee/fountain soda swipes.*** | | | | | | | |
| **EMPLOYEE INFORMATION** | | | | | | | |
| Employee Name: |  | | |  |  | | --- | --- | | **Payroll Deduction Schedule** | | | **Pay Period** | **Paycheck Dates** | | Feb B | 3/07/2024 | | Mar B | 4/04/2024 | | Apr B | 5/02/2024 | | May B | 5/30/2024 | | *All deductions will begin on the Feb B pay period* | | | | | | |
| Empl ID: |  | |
| Department: |  | |
| Number of Pay Period Deductions Elected: | 1 Pay Period  2 Pay Periods  3 Pay Periods  4 Pay Periods | |
| **SIGNATURE** | | | | | | | |
| I authorize the University of Wisconsin-Green Bay to withhold the amount indicated for the purchase of staff meal plans from my payroll check(s). | | | | | | | |
|  | | | | |  |  | |
| *Signature* | | | | |  | *Date* | |
| ***Completed forms should be sent to Human Resources by February 9, 2024 for processing.*** | | | | | | | |
| **FOR HR USE ONLY** | | | | | | | |
| Date Received: | | Deduction Amount: | | Pay Periods: | | | Sent to Dining Services: |