



*Scholarship Funds  
Booster Clubs*

## ***Payroll Deduction Authorization Form***

This authorization for payroll deduction will remain in effect each month until and unless revoked at any time by contacting the Payroll Department in writing.

Print ID and Name: \_\_\_\_\_ / \_\_\_\_\_  
(Emp ID Number) (Last Name) (First Name) (Middle Initial)

Employee Signature \_\_\_\_\_ Date \_\_\_\_\_

Effective date to start deduction \_\_\_\_\_  
(Month) / (Year)

***I authorize the Everett Public Schools to withhold  
the monthly deduction as specified below***

<b>Scholarship Name</b>	<b>\$ / month deduction</b>	<b>Payroll Use Only</b>
Cascade High School Scholarship Fund	\$	#2750
Everett High School Scholarship Fund	\$	#2753
HM Jackson High School Scholarship Fund	\$	#2752
Sequoia High School Scholarship Fund	\$	#2754
Peggy Hancock Memorial Scholarship Fund	\$	#2751
Blue & Gold Booster Club	\$	#2741

**Please return completed form to:**  
**Payroll Office, Everett Public Schools**