

# COUNT ME IN!!!

*I want to help VHCC students and the College!*

## Payroll Deduction Agreement

As an expression of support in the future of Virginia Highlands Community College and the VHCC Educational Foundation, I hereby request that the amount indicated below be withheld from my earnings on each regular pay period beginning with the earnings paid on the next available pay date. I understand that these deductions will continue until I have provided a written request to the VHCC Payroll Department to change or cancel the deduction.

I understand that this contribution is not a pre-tax deduction; I will be provided with a statement from the VHCC payroll department each January detailing my total contribution for the prior calendar year for income tax purposes.

Employee Name: \_\_\_\_\_

Empl ID Number: \_\_\_\_\_

Amount to be deducted each pay period: \$ \_\_\_\_\_

\_\_\_\_\_  
*Employee Signature*

\_\_\_\_\_  
*Date*

**Please use my gift for:**

- Greatest Needs
- Advanced Technology and Workforce Development Center
- Scholarships
  - General Scholarship Fund
  - Please designate my gift to \_\_\_\_\_ scholarship fund
  - I want to establish a new scholarship
- Library Renovation Fund
- Program Development
- Collins Extraordinary Experience Fund
- Other: \_\_\_\_\_



*\*\* Please return the completed form to the Office of Institutional Advancement \*\**