



**Human Resources**

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**EMPLOYEE FINANCIAL RESPONSIBILITY STATEMENT  
AND PAYROLL DEDUCTION AUTHORIZATION FORM**

During your employment, you will very likely take advantage of certain services offered by Gettysburg College. To insure that both parties understand the conditions and financial responsibilities involved, please read the following statement and sign below. This statement will be placed in your personnel file.

I understand that during my employment, I will be held financially responsible for any charge accounts (i.e., College Store, Telephone, etc.) traffic/parking fines, unsettled travel advances, and any personal bills that may be incurred between Gettysburg College and myself.

Furthermore, if the College is unable to collect my unpaid bills within sixty days from the original date of billing, I authorize the College to deduct such outstanding amounts from my salary/wages. This authorization to deduct from my payroll check is made with intent to be legally bound by the terms hereof.

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First and Last Name

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Signature

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Date