



PAYROLL AUTHORIZATION

I, _____, hereby authorize The University of Tennessee Health Science Center, at the time of my termination, to withhold from my final paycheck a sum equal to the following:

1. All unpaid personal accounts and fines
2. All money owed in compliance with the Educational Assistance Policy
3. Reasonable replacement cost of:
 - a. unreturned University keys
 - b. unreturned staff ID card
 - c. unreturned uniforms
 - d. un returned equipment
4. Value (through date of expiration) of unreturned parking stickers and special parking cards.

Signature

Date