

TAMIU Faculty/Staff Meal Plan Payroll Deduction Request Form Fall 2025

Employee Information		
Last Name	First Name	Employee UIN
Email	Phone E	xt.
Meal Plan Options		
Fall 2025 – Flex 30 \$300.00 (30 Me	0 	onthly Deductions – 3 Payments – FF30 \$100 / FF50 \$158.33 xempt Faculty/Staff)
Fall 2025 – Flex 50 \$475.00 (50 Me	O (Neal Swipes) Fall 20	weekly Deductions – 6 Payments – FF30 \$50 / FF50 \$79.17 on-Exempt Staff) 225: Deductions will be processed Sep – Nov. ay to enroll: September 13, 2025 Expire: December 10, 2025
*Faculty/Staff Meal Plans are not ava	ilable to student emp	oyees/graduate assistants.
Employee Authorization for Payroll Deduction		
I voluntarily authorize the deduction marked above from my after-tax wages for a Faculty/Staff Meal Plan. I understand that the meal plan is non-refundable, and meals will expire on the corresponding dates noted above.		
Employee Signature		Date
FOR PAYROLL OFFICE USE ONLY Posted:	Office of Budg A	BMIT TO: get, Payroll & Fiscal nalysis Processed By:
Pay Date:		Library 435 ayroll@tamiu.edu