
(Print) Last Name First Middle

Employee Id Number School/Dept.

AUTHORIZATION FOR PAYROLL DEDUCTION

I hereby authorize the School Board of Brevard County, Florida to deduct \$75.00 from my earnings for processing my **ADD-ON subject area** to my Florida certificate (**CANNOT BE USED AFTER MAY 1.**) Individuals no longer employed by the School Board of Brevard County, employees **on leave or charter school employees are NOT eligible for the payroll deduction option.**

**PLEASE RETURN THIS SHEET TO HUMAN RESOURCES/CERTIFICATION OFFICE.
DO NOT SEND TO PAYROLL DEPT.**

Employee Signature

OFFICIAL USE ONLY – CERTIFICATION OFFICE

FL DOE ***ADD-ON subject area*** application processed: _____ Date: _____