THE UNIVERSITY OF THE WEST INDIES
ST. AUGUSTINE

To: Campus Bursar

Subject: **SALARY DEDUTION FORM FOR THE ADOPT-A-STUDENT PROGRAMME**

Please deduct from my salary the sum of $ _____ per month for the period:

□ _____ **until** otherwise informed
    DD/MM/YY

                  OR

□ _____ **to** _____
    DD/MM/YY   DD/MM/YY

This will be my contribution to the Adopt-A-Student programme.

Name: _____

Staff ID No: _____

Department: _____

Category: _____

Signature: _____

Date: _____

Note: ***Please forward your completed slip to Mr. Ian Moreno, Financial Advisory Services Dept., Division of Student Services and Development, 1st Floor Lloyd Brathwaite Bldg. Or send via e-mail to*** [*ian.moreno@sta.uwi.edu*](mailto:ian.moreno@sta.uwi.edu)***.***

For Official Use ONLY

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_____   _____

Manager, Financial Advisory Services   Date