

## Chippewa Valley Educational Foundation Deduction Plan

I request and authorize Chippewa Valley Schools payroll to deduct from my earnings a contribution to the Chippewa Valley Educational Foundation (CVEF).

**Option 1: One Time Deduction**

Please deduct a ONE TIME contribution of \$\_\_\_\_\_ (break down below) from my paycheck.

**Option 2: Semi-Monthly Deduction**

Please deduct \$\_\_\_\_\_ (break down below) from my paycheck beginning \_\_\_\_\_. *If your employment terminates, you are not obligated to pay the balance.*

**Option 3: Discontinue Donations**

Please stop my deduction to the Chippewa Valley Education Foundation, effective \_\_\_\_\_. (date)

<u>Amount</u>	<u>Scholarship/Friend of Chippewa Valley Schools</u>	
_____	Barbara Maier Memorial Scholarship	BMM
_____	Henry Chiodini Memorial Scholarship	HCM
_____	Maureen Dutcher Memorial Scholarship	MDM
_____	Samantha Valdez Memorial Scholarship	SVM
_____	Ken Gherardini Memorial Scholarship	KGM
_____	Louise Coallier Memorial Scholarship	LCM
_____	Chippewa Valley Schools Employee Scholarship	CVE
_____	The Arts	ART
_____	Extended Learning Opportunities (Science Olympiad/Destination Imagine, etc.)	ELO
_____	School Grants (class mini-grants/science projects)	SGP
_____	Athletics/Fitness for Youth	AFY
_____	Open Donation (allocated based on greatest need)	OPE
_____	Mohegan High School Scholarship	MHS
_____	CVHS Guidance Dept. Scholarship	CGS
_____	CVHS Administration Scholarship	CAS
_____	CVHS Staff Scholarship	CES
_____	CVHS Science Dept. Scholarship	CSS
_____	DHS Boosters Scholarship	DBS

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name Here

\_\_\_\_\_  
School

Please return completed form to the Payroll Department.