Salary Advance Request Form



Employee Details:		
Employee Name :	Departmen	t :
Employee No :	Amount	:
Details of any other extraordinary deductions:		
Reason for advance request:		
I apply for the abovementioned salary advance advance repayments from my salary as follows	•	Atlantic University to deduct the
1 Pay Period 2 Pay Periods	3 Pay Period	ds 4 Pay Periods
Starting with the next pay period on:	Amount pe	r pay period:
If for any reason my employment with the University	•	
Signature:	Date:	
Approved by the HR Director	<u> </u>	proved by the President
(for requests under \$2,000)	(fo	r requests over \$2,000)
	Date	