



PAYROLL DEDUCTION POLICIES

Release of Confidentiality form with Human Resource Department must be updated every fiscal year. This gives HR staff permission to verify your employment status and allows us to process your credit application.

- 1. Yakama Nation Tribal Employees: Must be employed at your current position for one year or longer. Employment status has to be at Full performance.**
- 2. Enterprise Employee's must check with your current place of employment to verify if payroll deduction processing is allowed with the Theater.**
- 3. Provide copies of your last two current pay stubs, Tribal Badge (if you have one) & copy of your Driver's License.**
- 4. All payroll deductions will be submitted Bi-weekly and PAID IN FULL**
- 5. You will notify the Heritage Theater of any changes to your employment such as; terminations, furloughs, job change, name change, address or phone number changes. If terminated from employment, I agree to any outstanding balance due will be deducted in full on final paycheck or make arrangements for payment. If there still remains a balance on account the charge will resume upon re-entering the workforce.**
- 6. Purchases made after termination of employment will not be tolerated, if this action takes place you will no longer be allowed to have a payroll deduction account with the Heritage Theater.**
- 7. Credit limits are set on all accounts based on your current net pay and number of years employed at current place of employment.**
- 8. PRD application forms are available on the Yakama Nation website: www.yakamanation-nsn.gov. Cultural Center website: www.yakamamuseum.com**
- 9. Completed applications with all documentation attached can be emailed to maryjo_whitney@yakama.com.**



New: ___ Update: ___ Increase: ___

FY _____

Payroll Deduction Credit Application

Name _____	Enrollment# _____	D.O.B _____
Home Address _____	City _____	State _____ Zip _____
Mailing Address _____	City _____	State _____ Zip _____ Home# _____
S-S-N# _____	Driver's License # _____	Fax# _____
Email _____	Cell phone # _____	Work Ph. _____

Employment Information:

Place of Employment _____ Start Date of Employment _____
 Are you Full-Time: _____ Part-Time: _____ Seasonal: _____ Dates of furlough: _____

Do you have any other payroll deductions? (Housing, Credit, ECT.) Yes _____ No _____
 If checked yes, give an estimated monthly deduction total: _____

Verification of Employment:

Did you sign the Release of confidentiality form? This form is filled out with the Human Resource department; this allows them to release information about your employment.
 Yes _____ No _____ if you sign NO, H.R will not release any information, which prohibits us to verify employment and your application will be denied.

Policies:

1. Employment status has to be 1 year at CURRENT YAKAMA NATION TRIBAL PROGRAM.
2. Enterprise Employee's must check with your current place of employment to verify if payroll deduction processing is allowed with the Theater.
3. **Provide COPIES OF YOUR LAST TWO PAY STUBS, Tribal Badge & Copy of Driver's License.**
4. All payroll deductions will be submitted bi-weekly and paid in full.
5. You will notify the Heritage Theater of any changes to your employment such as; terminations, furloughs, job change, address or phone number changes. If terminated from employment, I agree to any balance paid in full on final paycheck. If there still remains a balance the charge will resume upon re-entering the workforce.
6. Purchases made after termination of employment will not be tolerated; you will no longer be allowed to have a payroll deduction account with the Heritage Theater.
7. Credit limits are set on all accounts based on your current net pay and number of years employed.

Should my employment with the Yakama Nation be terminated, I agree that any outstanding balance due to the Heritage Theater will be deducted from my final paycheck, and if my final paycheck does not clear my account, I will make arrangements for a payment plan with the Heritage Theater. If there still remains a balance on my account I give permission to resume my charge upon re-entering the workforce. I have read and accepted the Heritage Theater Policies as stated above.

Signature _____ Date _____

OFFICE USE ONLY:	Reason Pending: _____	Vendor# _____
Approved: _____	Disapproved _____	Credit Amount \$ _____
Authorized by:	Date Entered: _____	