

**OAK GROVE SCHOOL DISTRICT
Business Services Division**

Deferred Pay Form

To: Maureen DiRubio
Certificated Payroll

Carin Hmieleski
Classified Payroll

I would like my annual salary paid to me on a 12-month basis instead of 11 months, effective _____. I understand that my voluntary and medical deductions will remain on a 10 or 11 month schedule.

Name (Print)

Employee ID #

Date Signed

Signature