

**Allegheny College**  
**Payroll Authorization Form - Dental/Vision Coverage**  
**Current Employee**

Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Marital Status (circle one): \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_ Partner # of Dependents \_\_\_\_\_

**Dental Plan (check plan and classification):**

_____ <b>Elect/Change Coverage</b> (check classification below also)	<b>Per Pay Contribution Level</b>	
	<b>Paid Bi-Weekly</b>	<b>Paid Monthly</b>
_____ Single	\$12.65	\$25.30
_____ Employee & Spouse/Partner	25.27	50.54
_____ Employee & Child	26.57	53.13
_____ Employee & Children	26.57	53.13
_____ Family	37.92	75.83
_____ <b>Cancel Coverage</b>		

**Vision Plan (check plan and classification):**

_____ <b>Elect/Change Coverage</b> (check classification below also)	<b>Per Pay Contribution Level</b>	
	<b>Paid Bi-Weekly</b>	<b>Paid Monthly</b>
_____ Single	\$4.48	\$8.95
_____ Employee & Spouse/Partner	8.05	16.10
_____ Employee & Child	8.05	16.10
_____ Employee & Children	10.93	21.85
_____ Family	10.93	21.85
_____ <b>Cancel Coverage</b>		

**Salary Reduction Agreement (check appropriate arrangement):**

- By checking this line, I authorize Allegheny College to reduce my future earnings by the contribution level chosen above on a pre-tax basis effective \_\_\_\_\_.
- By checking this line, I authorize Allegheny College to reduce my future earnings by the contribution level chosen above on a post-tax basis \_\_\_\_\_.

I understand that the choices made above will remain in effect for at least two years. If I have a change in family or employment status, I may be able to change the choices made by completing a new payroll authorization form within 30 days of the date of the status change. I also understand that adding dependents to the coverage at a later date other than as a result of a change in family status (late enrollment) will require that I will be subject to the underwriting requirements of the carrier before the coverage can be provided.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_