

**OROVILLE UNION HIGH SCHOOL DISTRICT**  
**2211 Washington Avenue**  
**Oroville, CA 95966**  
**(530) 538-2300 ext. 114**

**REQUEST TO DEFER ANNUAL SALARY**

TO: Oroville Union High School District, Payroll Department

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

RE: CONTRACTED SALARY

\_\_\_\_\_

I request that my annual contracted salary be divided over a 12 month payment period.

**AND**

\_\_\_\_\_

I understand this request is for the entire school year and that I may not change back to an 11 month pay period or receive advance payment on the withheld portion of my salary during the contracted year.

**OR**

\_\_\_\_\_

I request that my annual contracted salary be paid in 11 equal payments.

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

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