



The University of Vermont

*In order for the University of Vermont, as employer, to obtain a refund of over-withheld Social Security and Medicare taxes from the IRS, the University is required to obtain a statement of consent from the employee, including acknowledgement that he or she has not and will not claim a refund or credit of such taxes directly from the IRS. An employee who was overpaid Social Security and Medicare taxable wages in a prior calendar year must complete and sign the Social Security Tax Certification below to fulfill this requirement.*

### Social Security Tax Refund Certification

I, \_\_\_\_\_ have not claimed, nor will I claim, a refund or credit  
*Print First and Last Name*

for over-collected Social Security or Medicare taxes directly from the IRS. I hereby consent to having the University of Vermont claim a refund of any such taxes withheld.

Signature \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\*

#### Departmental Use Only

Emplid \_\_\_\_\_

Tax Year(s) \_\_\_\_\_

Social Security Wage Adjustment \_\_\_\_\_

Social Security Tax Adjustment \_\_\_\_\_

Medicare Wage Adjustment \_\_\_\_\_

Medicare Tax Adjustment \_\_\_\_\_

*Revised 2014-04*