



Boston University Student Employment Office

PAYROLL DIRECT DEPOSIT CANCELLATION FORM

DIRECTIONS:

- 1) Please PRINT or TYPE all requested information.
- 2) SIGN THE FORM.
- 3) RETURN DIRECTLY TO:

Boston University
 Student Payroll Office
 881 Commonwealth Ave., 2nd Floor
 Boston, MA 02215

NOTE: Direct Deposit will end by the next payroll date. YOUR PAYCHECK WILL BE SENT DIRECTLY TO YOUR DEPARTMENTAL ADDRESS.

NAME: _____ **B.U.ID:** **U** _____

TYPE OF EMPLOYEE: Faculty _____ Staff _____ Student X

BANK NAME: _____

ACCOUNT NUMBER: _____

TYPE OF ACCOUNT: Checking _____ Savings _____ NOW _____

I hereby authorize my employer, Boston University, to cancel the direct deposit of my paycheck to the above named bank.

EMPLOYEE SIGNATURE: _____ **DATE:** ____/____/____