



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. You will now be issued pay checks. Charles River Campus students may pick up pay checks from the Student Payroll Office. Medical Campus student employees should check with their department.

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 pay check to the above named bank.

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