

## DIRECT DEPOSIT REACTIVATION FORM

Name (please print Last, First, MI): \_\_\_\_\_

N# N \_\_\_\_\_ Last 4 SSN: \_\_\_\_\_

(Your N# can be found on your paper or electronic pay stub)

Email \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Job Classification/Agency Code** (check all that apply)

\_\_\_\_\_ Faculty/Staff – 28180

\_\_\_\_\_ Student Assistant- 28181

\_\_\_\_\_ Graduate Assistant - 28189

\_\_\_\_\_ College Work Study- 28183

I request reactivation of the Direct Deposit **account information currently on record** for New York State payroll(s) at Fredonia at the following:

**Bank Name:** \_\_\_\_\_

Go Paperless – I request to opt out of receiving a printed copy of my Direct Deposit pay stub sent to me. I understand that I can view and print my electronic pay stubs via the SUNY Self Service Portal and NYS Payroll Online (NYSPO) accessed via <https://www.suny.edu/hrportal>

I understand that this form is only applicable for accounts that are open and active, and that I have not closed my bank account(s) with the listed bank(s). I understand that it is my responsibility to notify the Payroll Office if any changes are made to my account(s) via a separate Direct Deposit Enrollment form, while employed and utilizing Direct Deposit. This reactivation will take place in the next available payroll period for the agency code listed, and may not be the next paycheck date. **Incomplete forms will delay processing.**

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

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

Please return Reactivation Form to **Payroll Services** at 303 Maytum Hall, email to [Payroll.Services@fredonia.edu](mailto:Payroll.Services@fredonia.edu), or fax to 716-673-3630.