

## DIRECT DEPOSIT REACTIVATION FORM

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

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

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

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

\_\_\_\_\_ Faculty/Staff – 28180                      \_\_\_\_\_ Student Assistant- 28181  
\_\_\_\_\_ Graduate Assistant/  
Teaching Assistant 28189                      \_\_\_\_\_ College Work Study- 28183

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.**

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:** \_\_\_\_\_

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

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