



DIRECT DEPOSIT REACTIVATION REQUEST

Date: _____

Name (first last): _____

NYS ID (from your paycheck): _____
(If unavailable please use Albany Campus ID)

Please reactivate my Direct Deposit using the information already on file.
There have been no changes to my financial institution or account *.

I am currently employed as (check all that apply):

- Faculty/Staff
- Graduate/Teaching Assistant
- Student Assistant
- College Work-Study

Start Date: _____
(If not currently employed or recently hired)

- I have more than one job and want Direct Deposit for all of my active jobs.
- Save the environment! Please don't print my direct deposit stub, I will access my information on NYS Payroll online LOG IN AT:
www.suny.edu/hrportal

Signature

Email and/or phone number

***Changes in banking information require completion of a new Direct Deposit Authorization Form**