BINGHAMTON UNIVERSITY STATE UNIVERSITY OF NEW YORK

DIRECT DEPOSIT REACTIVATION FORM

Name (Last, Fi	rst, MI):					
B# or N# :	Cell Phone:					
	Email:			_@binghamton	.edu	
Job Classifica	tion/Agency C	Code (choose from <i>or</i>	ne of the follow	/ing):		
Gra Stu	dent Assistan	antship or Teaching	Assistantship	o – 28029		
Is this for Cur	rent or Future	employment? (If FU	JTURE – Inclu	ide Start Date)		
Curren	t					
Future	Start Dat	e:				
		deposit account info rersity at the following		ently on record	/ for New Yo	rk State
Bank Name: _						
GO PA	l PERLESS - 1 a	aa* 0.Od(h(e)11)-aa6 losed my bank accou whee stand that iPIs f ccount(s) via a separa kt paycheck date. Inc	nt(s) with the li ify responsibili ate Direct Dep	isted bank(s). ty to notify the P osit Enrollment f	ayroll office form, while e	if any changes are ma
	Signature:					
	Date:					