



FINAL PAYCHECK FORM

Name:

Last First M. I. Last 4 SS # or V#

Phone Number: (____) _____

Please remember to return this form and all necessary Timesheets / Leave Reports to your supervisor so we may ensure an accurate final paycheck. Supervisors must return everything electronically to payroll@wou.edu or in person to the Human Resources Office, Third Floor of Administration. Interoffice mail may not be received in time.

- I understand my final check will include remaining banked leave that is due to be cashed out (ie vacation up to 180 hours for unclassified and up to 250 hours for classified, and remaining comp time).
- I would like my final check to go via direct deposit the last business day of the month.
- I would like to pick up my final check at the HR Office, Third Floor of Administration on my final day between 3:00pm and 5:00pm.
- I would like my final check mailed to the following address on my final day:

Address City State Zip

Signature

Date

HR Office Only

Vacation Hours Paid Out: _____

Comp Hours Paid Out: _____

Final Check Created: _____ By: _____