

## CANCELLATION FORM - ANNUALIZED SALARY SPREAD AGREEMENT

## TO THE OFFICE OF HUMAN RESOURCES:

I hereby cancel my annualized salary agreement of 26 bi-weekly pays for the 2024 – 2025 Academic Year. I understand this request will go into effect August 4, 2024 and I will have my salary paid over 20 or 22 pays periods, whichever is applicable to my appointment.

I understand this change will be reflected on my first academic year 2024 – 2025 paycheck to be received on August 30, 2024.

I also understand my group health and life premiums will be double deducted in March, April and May to assure summer insurance premiums are paid for the continuation of my health insurance.

## Return form to the HR Service Center no later than July 14, 2023, through one of the following:

- Campus Box 15
- Fax 316-978-3201
- Scan and email to: HR.ServiceCenter@wichita.edu
- In person to the HR office

| Signature    |      |
|--------------|------|
| Printed Name |      |
| MyWSU ID     | <br> |