**Request to Waive 7-day Final Check**

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

I understand that I am entitled to receive my final paycheck within seven working days from the date of my employment termination. However, in order to receive my final pay by direct deposit to my bank account, I am waiving my right to receive my pay within that seven day period. I understand that my final pay will be deposited into my bank account on the regularly scheduled payday for the pay period that includes my final day of pay.

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Employee Signature

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Supervisor Signature