



Bus+ Cancellation form

Personal details

Title
Surname
Forename(s)
Address _____ _____ _____ _____
Postcode
Email
Telephone
Payroll number
Preferred end date of the Scheme <i>(which must be the last day of a calendar month)</i>
Please confirm your reason(s) for cancellation (please refer to FAQs for details) _____ _____

Confirmation of Cancellation

- I hereby provide one month's notice to cancel my participation in The University of Reading Bus+ Scheme.
- I understand that my salary will revert to its Reference salary once the cancellation process is complete.
- I acknowledge that I am not eligible to receive a Commuting Card from Reading Buses and as a result, my Commuting Card will be deactivated.

Signed	Date
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Please send this completed form to: HR Operations, Room 110, Whiteknights House, University of Reading, PO Box 217, Reading, Whiteknights, Reading, RG6 6AH or e-mail hroperations@reading.ac.uk.

For HR Operations use only

Date received:
Actioned on Trent:
Deduction element end date:
Details entered on Bus+ spreadsheet:
Signed: