



Sveriges lantbruksuniversitet  
Swedish University of Agricultural Sciences

**Division of Human Resources**

**TERMINATE OR PAUSE YOUR SALARY EXCHANGE**

Personal identity number	Name
Department	

My salary exchange shall terminate from this date (note 3 months' notice):

Date	Employee's signature
Date	Manager's signature
Manager's name in block letters	

Please note that both parties must sign the form using the same method. If the employee provides a handwritten signature, then the employer must also provide a handwritten signature. Likewise if the employee provides an electronic signature, the employer must also provide an electronic signature. Post forms with handwritten signatures to the Payroll Unit. Forms signed electronically can be emailed to [loner@slu.se](mailto:loner@slu.se).

---