

Stevenson University Direct Deposit Authorization

I, _____ authorize Stevenson University to deposit my net pay automatically into my account(s) each payday. If funds to which I am not entitled are deposited into my account, I authorize Stevenson University to direct the bank to return said funds.

Pay Cycle: Biweekly Monthly

(Note: It takes 2 pay cycles before direct deposit goes into effect. Pay Advices can be accessed through WebXpress.)

#1 - Primary Account

Type (check one): Checking Savings

Bank Name

Net Pay _____

Bank Routing #

Account #

#2 - Secondary Account

Type (check one): Checking Savings

Bank Name

Dollar Amount to be Deposited to This Account

Bank Routing #

Account #

#3 - Secondary Account

Type (check one): Checking Savings

Bank Name

Dollar Amount to be Deposited to This Account

Bank Routing #

Account #

Please attach a voided check here for each checking account.

This authorization will remain in effect until Stevenson University receives a written termination from myself and has a reasonable opportunity to act on it. I will contact the payroll office if my account has been closed.

Signature

Employee ID#

Department

Date

For Payroll Use Only:

verification that form was received by employee in person or spoke to employee directly concerning initiation or changes to this form

Signature of HR or Payroll personnel

SU/HR 0040 01/16/2020