NORTHERN ARIZONA UNIVERSITY

REQUEST FOR DIRECT DEPOSIT

Name: _____ Employee ID #: ☐☐☐☐☐☐☐

Daytime Phone: ☐☐☐ - ☐☐☐ - ☐☐☐☐

You must Complete, Sign and Date this " Request for Direct Deposit" form to:
- ☐ Enroll in Direct Deposit
- ☐ Change Current Enrollment Information
- ☐ Add an additional account
- ☐ Cancel enrollment

Please attach the proper documentation:
- Voided check for a checking account
- Documentation from the bank verifying your routing and account number
- For questions about the documentation above contact HR/Payroll at 523-1348
- If choice is "Cancel" no documentation is required

Please note: Verify the type of account, bank transit Number and account number with your bank before submitting this form. If you only have one account your entire net pay will be deposited into that account. Any new account or old account that has been modified will pre note and you will receive a check for that pay date.

Once I authorize Direct Deposit with either the Human Resources/Payroll Department or the Bursar's Office I understand that any and all refunds, Payroll and Financial Aid will be disbursed to me using this account information.

I herby authorize and request Northern Arizona University to automatically deposit my payroll check into my account(s) listed above. This includes my authorization to correct any entries made in error. This authorization will remain in effect until I give written notice to cancel it.

Account #1   Use Existing Account ☐
Financial Institution:_____Branch:_____

City:_____State:_____Zip:_____
Type of Account: Checking ☐   Savings ☐
Bank Transit/ABA: Account #:
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Remainder of net pay will be deposited into this account
Priority 999

Account #2   Use Existing Account ☐
Financial Institution: _____Branch:_____

City:_____State:_____Zip:_____
Type of Account: Checking ☐   Savings ☐
Bank Transit/ABA: Account #:
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Amount to be deposited: %_____ Or $ _____
Priority 888

Employee Signature: _____ Date: _____