

# AUSTIN PEAY STATE UNIVERSITY

## Direct Deposit Authorization Form

Name \_\_\_\_\_ Banner I.D. (preferred)/S.S.No. \_\_\_\_\_

Address \_\_\_\_\_

Phone No. (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

APSU Email Address (for email notification of payroll remittance advice) \_\_\_\_\_

Please check one:     Regular Employees     Temporary     Adjunct     Student

<b>1. Net Pay Deposit:</b>	<input type="radio"/> New	<input type="radio"/> Change	
Financial Institution Name _____	<input type="radio"/> Checking	<input type="radio"/> Savings	<input type="radio"/> Other
Routing Transit No <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Acct No <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		

<b>2 Fixed Dollar Amount Deposit:</b>	Amount \$ _____	<input type="radio"/> New	<input type="radio"/> Change	<input type="radio"/> Cancel
Financial Institution Name: _____	<input type="radio"/> Checking	<input type="radio"/> Savings	<input type="radio"/> Other	
Routing Transit No <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Acct No <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			

<b>3. Fixed Dollar Amount Deposit:</b>	Amount \$ _____	<input type="radio"/> New	<input type="radio"/> Change	<input type="radio"/> Cancel
Financial Institution Name _____	<input type="radio"/> Checking	<input type="radio"/> Savings	<input type="radio"/> Other	
Routing Transit No <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Acct No <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			

- There may be up to sixty (60) days administrative processing before enrollment will become effective.
- It is your responsibility to notify Austin Peay State University Human Resources office of any changes in your account, such as account closure or change in account number.
- This agreement may be cancelled by your financial institution or Austin Peay State University. Austin Peay State University reserves the right to automatically cancel your participation in the direct deposit program upon termination of employment.
- **You must provide a blank voided check or a direct deposit form from your financial institution with the required information for direct deposit. A deposit slip may not be acceptable documentation.**

*I authorize Austin Peay State University to initiate credit entries to the account(s) indicated for the purpose of depositing earnings from my employment. I also authorize Austin Peay State University to initiate, if necessary, debit entries and adjustments for any credit entries made in error.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE ATTACH A VOIDED CHECK HERE**