

DEPAUW UNIVERSITY

INFORMATION AND AUTHORIZATION REGARDING DIRECT DEPOSIT

1. Provide ALL information requested on this form _____

2. Attach a copy of a check, a voided check or a letter from your bank listing the bank's routing number and your account number. Deposit slips of any kind are NOT acceptable.

For PAYROLL:

A. The first pay **after** this direct deposit document is processed in the Payroll Office you will receive a **paper check**. Student checks will be delivered to his or her UB Box. Employees may pick up their check at the Human Resources Office.

Do Not in space

I authorize DePauw University and the financial institution(s) below to deposit any amounts owed to me to the

Address:

SSN/TIN

Primary Bank Name:

Second Bank Name:

account(s) listed below. In the event that DePauw University deposits funds in error, I authorize a debit from the account not to exceed the original amount that was in error. This authorization will remain in effect until written notice is received by the university.