

# DIRECT DEPOSIT APPLICATION FORM

## Step 1: Complete this section.

Name \_\_\_\_\_  
AU ID # \_\_\_\_\_ Social Security # \_\_\_\_\_  
Department \_\_\_\_\_ Email Address \_\_\_\_\_  
Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

I am paid  Monthly  Bi-weekly I am a  Student  Faculty  Staff Member

I work  Full Time  Part Time

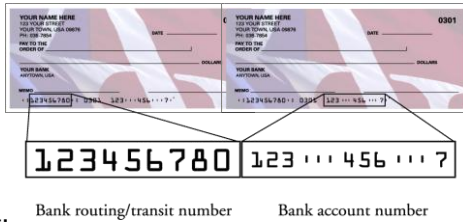
Action  New Direct Deposit  Delete previous accounts and change to the accounts below  Stop Direct Deposit

## Step 2: Complete this section. Contact your financial institution for bank transit/ABA number.

Bank Account #1 \_\_\_\_\_  
Bank Name: \_\_\_\_\_  
Bank Transit/ABA No.: \_\_\_\_\_  
Bank Account No.: \_\_\_\_\_

Account Type:  
 Checking  
 Savings

Amount to be Transferred:  
 Total Net Pay  
 Partial Amount: \$ \_\_\_\_\_ NOTE: Remainder must be direct deposited into another account.



Bank Account #2 \_\_\_\_\_  
*Optional: If you wish to have direct deposit for more than two accounts, please complete another copy of this form and attach it.*

Bank Name: \_\_\_\_\_  
Bank Transit/ABA No.: \_\_\_\_\_  
Bank Account No.: \_\_\_\_\_

Account Type:  
 Checking  
 Savings

Amount to be Transferred:  
 Balance of pay amount

## Step 3:

For direct deposit to checking attach:

- A voided check OR
- Checking account issue card OR
- Direct Deposit Form from your financial institution.

For direct deposit to savings/investment account attach:

- Savings account issue card OR
- Direct Deposit Form from your financial institution.

## Step 4: Carefully read these terms of agreement for direct deposit:

### If I want to cancel direct deposit...

I understand that I may cancel my Direct Deposit by providing written notice to Human Resources at least TEN (10) BUSINESS DAYS before the next payroll due date.

### If I change or close my Bank Account...

I understand that it is solely my responsibility to notify Human Resources immediately of any changes to my bank account that might affect my direct deposit.

### If I separate from the university...

I understand that my final payment will be a check.

### Confirmation of deposit

I understand it is my responsibility to prevent overdraft by verifying each deposit is in my account before I write checks.

In the event that funds are transmitted in error to my account, I authorize American University to reverse the deposit of such funds from my account. I understand that if a reversal of funds is necessary, I will be advised by the university in advance.

## Step 5: Sign

I certify that the information provided is correct and that I have read and understood the terms of this agreement. By signing this agreement, I authorize AU to send my payments to the account(s) at the financial institution(s) named above.

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

### For HR Use Only:

Bank Code #1: \_\_\_\_\_ Bank Code #2: \_\_\_\_\_ Initial: \_\_\_\_\_ Date Entered: \_\_\_\_\_