

Please update my Accounts Payable Reimbursement Account, if this box is not checked only your payroll account will be updated

# Payroll Direct Deposit Authorization Form

Employee Information

Student/RA/GA

Reg Employee/Temp/Adjuncts

First Name:

Last Name:

Address:

(No PO Boxes)

City:

State:

Zip Code:

Phone Number:

Email

Date of Birth

A Number or Social Sec. #

**New Direct Deposit**

All Direct deposit accounts will be prenoted prior to your first payday. If prenote is successful your first paycheck will be direct deposited. If prenote is unsuccessful a US Bank Focus Payroll card will be issued.

**Focus Card**

With the Focus Card, your pay will be deposited onto a prepaid Visa card. Your card can be used anywhere Visa debit cards are accepted worldwide. It's not a credit card and there is no cost to enroll.

**Direct Deposit Change/ Old Account**

An old account is being replaced with a new account, your funds will be deposited into the old account until the new one becomes active, usually 1-2 pay periods.

## Account Information

1. Check the box on the left for each account you would like.
2. Fill in the account information and the deduction amount. For each account, you may select a whole dollar amount, a % or the remaining balance to be deposited.

### If Choosing Direct Deposit

Please attach a voided check or copy of check. Do not attach a deposit slip, the routing number is not always correct.

<input checked="" type="checkbox"/>	Bank Name	Account #	Routing #	Type Of Account	Deduction Amount
<input type="checkbox"/>	U.S. Bank Focus Card	600	071004200	Focus Card	<input type="checkbox"/> \$_____.00 Cancel <input type="checkbox"/> _____% <input type="checkbox"/> Remaining balance
<input type="checkbox"/>				<input type="checkbox"/> Checking <input type="checkbox"/> Savings	<input type="checkbox"/> \$_____.00 Cancel <input type="checkbox"/> _____% <input type="checkbox"/> Remaining balance
<input type="checkbox"/>				<input type="checkbox"/> Checking <input type="checkbox"/> Savings	<input type="checkbox"/> \$_____.00 Cancel <input type="checkbox"/> _____% <input type="checkbox"/> Remaining balance

### Important Information About Procedures For Opening A New Account

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: when you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask to see your driver's license or other identifying documents. I hereby authorize my employer to initiate credit entries (deposits) and to initiate, if necessary, debit entries and adjustments for any credit entries in error to my Focus Card or bank account. This includes authorization to deposit Title IV funds. This authorization will remain in effect until cancelled by me with written notification to my employer.

If you are a student by signing this form, I understand that I am authorizing APSU to deposit into the account indicated any Title IV funds which I have received. I understand that my financial aid funds may be adjusted if I withdrew from the University, drop classes, or receive an over award. If this adjustment results in a charge to my student account after my direct deposit has been processed, I understand that it is my responsibility to arrange for payment of this charge. If my financial institution due to a change or error on my part does not accept my EFT, I understand that these funds cannot be released to me until the EFT has been returned to the University. I further understand that prompt notice to Accounting Services or payroll of any changes in my bank account status will avoid such delays.

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

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

The Focus Card is issued by U.S. Bank National Association pursuant to a license from Visa U.S.A. Inc. Member FDIC. © 2014 U.S. Bank.



STAPLE CHECK HERE

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For Assistance contact payroll at 931-221-7465 OR payroll@apsu.edu