



# University of Massachusetts

AMHERST • BOSTON • DARTMOUTH • LOWELL • WORCESTER

## AUTHORIZATION AGREEMENT FOR EMPLOYEE DIRECT PAYROLL DEPOSITS

Employee Self Service in HR DIRECT is the securest way to update your direct deposit information. However, if you are going to use this manual form to update your information, **do not send it through email**. Use either interoffice mail or U.S. mail, send the form in a sealed envelope to the Payroll Office.

Employee Name: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Employee ID: \_\_\_\_\_ Phone: \_\_\_\_\_

### BANK INFORMATION

(Select Balance on Only One Box)

#### Deposit Priority (1) – Deducts this amount 1st

Allow Partial Deduction

Full Deposit or Balance

New  Delete  Change New Amount \$ \_\_\_\_\_

Bank Transit/Routing# (9 digits): \_\_\_\_\_ Account Number: \_\_\_\_\_

Bank Name: \_\_\_\_\_  Checking  Savings

#### Deposit Priority (2) – Deducts this amount 2nd

Allow Partial Deduction

Full Deposit or Balance

New  Delete  Change New Amount \$ \_\_\_\_\_

Bank Transit/Routing # (9 digits): \_\_\_\_\_ Account Number: \_\_\_\_\_

Bank Name: \_\_\_\_\_  Checking  Savings

#### Deposit Priority (3) – Deducts this amount 3rd

Allow Partial Deduction

Full Deposit or Balance

New  Delete  Change New Amount \$ \_\_\_\_\_

Bank Transit/Routing # (9 digits): \_\_\_\_\_ Account Number: \_\_\_\_\_

Bank Name: \_\_\_\_\_  Checking  Savings

#### Deposit Priority (4) – Deducts this amount 4th

Allow Partial Deduction

Full Deposit or Balance

New  Delete  Change New Amount \$ \_\_\_\_\_

Bank Transit/Routing # (9 digits): \_\_\_\_\_ Account Number: \_\_\_\_\_

Bank Name: \_\_\_\_\_  Checking  Savings

I herby authorize the University of Massachusetts to deposit my net pay as indicated above at the financial institution(s) named above. I understand the University of Massachusetts may cause my account to be adjusted to the extent necessary to correct any over deposit and I agree to hold the above named financial institution(s) harmless for any erroneous deposits or adjustments not caused by the financial institution.

It is understood that I may terminate this agreement at any time by written notification to the University of Massachusetts. Any such notification to the University of Massachusetts shall be effective only with respect to entries initiated by the University after receipt of such notification and reasonable opportunity to act upon it. Any such notification to the bank by the employee is unacceptable. The bank may terminate this agreement by written notice to the employee for just cause.

EMPLOYEE SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_