

# WARTBURG COLLEGE

## DIRECT DEPOSIT AUTHORIZATION FORM

The completion of this form authorizes Wartburg College to deposit your wages into your checking or savings account. This form would also need to be completed if you wish to cancel your direct deposit. Employee pay stubs are available on the InfoCenter.

All changes must be in writing and submitted to the Human Resources Office/Student Employment Office at least 15 days prior to the next payroll date. Each account requires a separate form.

Always be sure to notify your bank when setting up direct deposit for your wages.

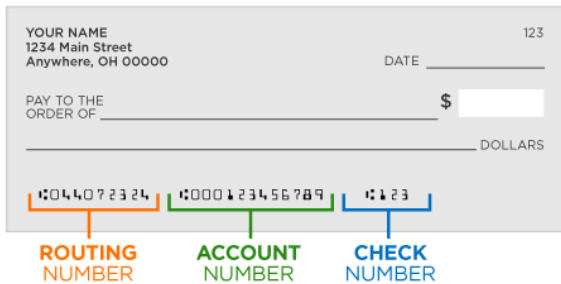
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### Please check the appropriate box:

- New Direct Deposit     Change to Current Direct Deposit     Cancel Current Direct Deposit

**Bank Name:** \_\_\_\_\_ **Bank Phone #:** \_\_\_\_\_

**Bank Address:** \_\_\_\_\_ **City & State:** \_\_\_\_\_



Printed documentation (i.e. voided check or letter from your bank) of your bank's routing number and your account number is needed. This information may be faxed to Human Resources at (319) 352-8417.

Note: A debit card number or member ID number for a credit union are not valid bank account numbers. Do not use the routing number that is listed on a deposit slip.

**Routing Number:** \_\_\_\_\_

**Account Number:** \_\_\_\_\_

**Account Type (check one):**     Savings Account     Checking Account

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By signing this form, I authorize Wartburg College to directly deposit my wages into the checking or savings account identified above and to mail my check to the address currently on file. I understand that if I provide inaccurate bank account information on this form, it will result in a delay of receiving my wages. In the event of an error, I will personally reimburse or authorize Wartburg College to allow my bank to return any deposited funds to which I was not entitled.

**Employee Name (printed):** \_\_\_\_\_ **ID #:** \_\_\_\_\_

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_