



Western Kentucky University  
Authorization Agreement For Direct Deposit

Important Reminders:

1. WKU must prenotify your financial institutions that a direct deposit transaction is being established.  
*Please note - An actual check will be generated during the payroll in which your account is being prenotified.*
2. Failure to notify the Payroll Department in a timely manner of changed or closed accounts may substantially delay the receipt of payments, once the attempt has been made to deposit funds into an invalid account.
3. Any expense reimbursements you receive from the University will be direct deposited into your primary account.

<b>Primary Account</b>	<input type="checkbox"/> New enrollment	<input type="checkbox"/> Stop direct deposit	(Date _____)
<input type="checkbox"/> Savings Account <input type="checkbox"/> Checking Account <input checked="" type="checkbox"/> 100% of Net Pay	<div><b>Staple a voided check from your account here</b> <b>Important Note:</b> We cannot take action without a voided check attached. If you wish to have your pay deposited into a savings account, please provide confirmation from your financial institution of the correct ABA routing/transit number and savings account number.</div>		
_____ Name of Financial Institution	: _____:  ABA Transit Number	_____ Account Number	

<b>Secondary Account</b>	<input type="checkbox"/> New enrollment	<input type="checkbox"/> Stop direct deposit	(Date _____)
<input type="checkbox"/> Savings Account <input type="checkbox"/> Checking Account <input type="checkbox"/> \$ _____	<div><b>Staple a voided check from your account here</b> <b>Important Note:</b> We cannot take action without a voided check attached. If you wish to have your pay deposited into a savings account, please provide confirmation from your financial institution of the correct ABA routing/transit number and savings account number.</div>		
_____ Name of Financial Institution	: _____:  ABA Transit Number	_____ Account Number	

Employee's Authorization:

I have read the reminders and hereby authorize Western Kentucky University and the financial institution(s) listed above to initiate electronic credit entries, and if necessary, debit entries and adjustments for any credit entries in error to my above listed account(s).

\_\_\_\_\_  
Employee's Name (Please Print)

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
WKU ID Number (800-XX-XXXX)

\_\_\_\_\_  
Date

Payroll Use Only	
<input type="checkbox"/>	MN Payroll
<input type="checkbox"/>	MP Payroll
<input type="checkbox"/>	SM Payroll
<input type="checkbox"/>	BW Payroll

February 2006

Name \_\_\_\_\_